## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 1 of 56

| Fill in this information to identify your case: |                               |                                      |
|---|-------------------------------|--------------------------------------|
| United States Bankruptcy Court for the:         |                               |                                      |
| NORTHERN DISTRICT OF GEORGIA                    | _                             |                                      |
| Case number (if known)                          | Chapter you are filing under: |                                      |
|   | Chapter 7                     |                                      |
|   | ☐ Chapter 11                  |                                      |
|   | ☐ Chapter 12                  |                                      |
|   | ☐ Chapter 13                  | ☐ Check if this is an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1:               | Identify Yourself   |  |   |
|----|---------------------|---|--|---|
|    |                     |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You                 | r full name   |  |   |
|    | you<br>pictu<br>exa | e the name that is on<br>r government-issued<br>ure identification (for<br>mple, your driver's<br>nse or passport). | Conchetta First name Larae                                     | First name                                    |
| B  | Brin<br>iden        | g your picture<br>tification to your<br>sting with the trustee.   | Middle name  Dansler  Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2. |                     | other names you have<br>d in the last 8 years   |  |   |
|    |                     | ude your married or<br>den names.   |  |   |
| 3. | you<br>nun<br>Indi  | y the last 4 digits of<br>r Social Security<br>nber or federal<br>vidual Taxpayer<br>ntification number<br>N)       | xxx-xx-1846  |   |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 2 of 56 Case number (if known)

Debtor 1 Conchetta Larae Dansler

|   |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
|---|--|---|--|--|--|--|
| 4. Any business names ar<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years<br>Include trade names and<br>doing business as names |  | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |  |  |  |
|   |  |   |  |  |  |  |
| 5.  | Where you live                                 | 16A Grandview Court NW  | If Debtor 2 lives at a different address:  |  |  |  |
|   |  | Cartersville, GA 30120  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code |  |  |  |
|   |  | Bartow  |  |  |  |  |
|   |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. |  |  |  |  |
|   |  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |  |  |
| 6.  | Why you are choosing this district to file for | Check one:  | Check one:   |  |  |  |
|   | bankruptcy                                     | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.   |  |  |  |
|   |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |  |
|   |  |   |  |  |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 3 of 56

Debtor 1 Conchetta Larae Dansler

Case number (if known)

| Par   | Tell the Court About  | Your Ba   | nkruptcy Ca                     | ise                                 |   |   |                                    |  |  |
|-------|---|---|---------------------------------|-------------------------------------|---|---|------------------------------------|--|--|
| 7.    | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                                 |                                     |   |   |                                    |  |  |
|       | choosing to file under  | ■ Chapter 7   |                                 |                                     |   |   |                                    |  |  |
|       |   | ☐ Ch  | apter 11                        |                                     |   |   |                                    |  |  |
|       |   | ☐ Ch  | apter 12                        |                                     |   |   |                                    |  |  |
|       |   | ☐ Ch  | apter 13                        |                                     |   |   |                                    |  |  |
|       |   |   |                                 |                                     |   |   |                                    |  |  |
| 8.    | How you will pay the fee  | (   | about how yo                    | ou may pay. Туր<br>attorney is sub  | pically, if you are paying the fee y                                  | ck with the clerk's office in your local court fourself, you may pay with cash, cashier's chalf, your attorney may pay with a credit car    | heck, or money                     |  |  |
|       |   |   |                                 |                                     | stallments. If you choose this option to (Official Form 103A).        | ion, sign and attach the Application for Indiv  | iduals to Pay                      |  |  |
|       |   |   | ū                               |                                     | ,   | on only if you are filing for Chapter 7. By law   | v, a judge may,                    |  |  |
|       |   | <br>  | but is not req<br>applies to yo | uired to, waive<br>ur family size a | your fee, and may do so only if y<br>nd you are unable to pay the fee | our income is less than 150% of the official in installments). If you choose this option, y icial Form 103B) and file it with your petition | poverty line that ou must fill out |  |  |
| 9.    | Have you filed for bankruptcy within the  | ■ No.   |                                 |                                     |   |   |                                    |  |  |
|       | last 8 years?   | ☐ Yes   |                                 |                                     | 140-  | 0   |                                    |  |  |
|       |   |   | District                        |                                     | When  |   |                                    |  |  |
|       |   |   | District                        |                                     | When<br>When  | Case number   |                                    |  |  |
|       |   |   | District                        |                                     | when  | Case number   |                                    |  |  |
| 10.   | Are any bankruptcy  | ■ No  |                                 |                                     |   |   |                                    |  |  |
|       | cases pending or being filed by a spouse who is not filing this case with you, or by a business | ☐ Yes   | s.                              |                                     |   |   |                                    |  |  |
|       | partner, or by an affiliate?  |   |                                 |                                     |   |   |                                    |  |  |
|       | annate:   |   | Debtor                          |                                     |   | Relationship to you   |                                    |  |  |
|       |   |   | District                        |                                     | When  | Case number, if known   |                                    |  |  |
|       |   |   | Debtor                          |                                     |   | Relationship to you   |                                    |  |  |
|       |   |   | District                        |                                     | When  | Case number, if known   |                                    |  |  |
| 11    | Do you rent your  |   | Go to I                         | ine 12.                             |   |   |                                    |  |  |
| • • • | residence?  | ■ No.   |                                 |                                     |   |   |                                    |  |  |
|       |   | ☐ Yes   | . ,                             |                                     | ained an eviction judgment again                                      | st you?   |                                    |  |  |
|       |   |   |                                 | No. Go to line                      |   |   |                                    |  |  |
|       |   |   |                                 | Yes. Fill out Ir. this bankrupto    |   | Judgment Against You (Form 101A) and fil  | le it as part of                   |  |  |
|       |   |   |                                 |                                     |   |   |                                    |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 4 of 56

Debtor 1 Conchetta Larae Dansler

Case number (if known)

| Par   | Report About Any Bu   | sinesses | You Own as a Sole Proprietor   |  |  |  |  |  |  |
|---|---|----------|--|--|--|--|--|--|--|
| 12.   | Are you a sole proprietor of any full- or part-time business?   | ■ No.    | Go to Part 4.  |  |  |  |  |  |  |
|   |   | ☐ Yes.   | Name and location of business  |  |  |  |  |  |  |
|   | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |          | Name of business, if any   |  |  |  |  |  |  |
|   | If you have more than one sole proprietorship, use a  |          | Number, Street, City, State & ZIP Code   |  |  |  |  |  |  |
|   | separate sheet and attach it to this petition.  |          | Check the appropriate box to describe your business:   |  |  |  |  |  |  |
|   |   |          | ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  |  |  |  |  |  |  |
|   |   |          | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |  |  |  |  |
|   |   |          | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))   |  |  |  |  |  |  |
|   |   |          | ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  |  |  |  |  |  |  |
|   |   |          | □ None of the above  |  |  |  |  |  |  |
| 13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stated operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the property of the set of the property of the property of the property of the set of the property of the |   |          |  |  |  |  |  |  |  |
|   | debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).   | ■ No.    | o. I am not filing under Chapter 11.   |  |  |  |  |  |  |
|   |   | □ No.    | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. |  |  |  |  |  |  |
|   |   | ☐ Yes.   | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.      |  |  |  |  |  |  |
| Par   | t 4: Report if You Own or   | Have Any | Hazardous Property or Any Property That Needs Immediate Attention  |  |  |  |  |  |  |
| 14.   | Do you own or have any property that poses or is  | ■ No.    |  |  |  |  |  |  |  |
|   | alleged to pose a threat of imminent and identifiable hazard to   | ☐ Yes.   | What is the hazard?  |  |  |  |  |  |  |
|   | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |          | If immediate attention is needed, why is it needed?  |  |  |  |  |  |  |
|   | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |          | Where is the property?   |  |  |  |  |  |  |
|   | •   |          | Number, Street, City, State & Zip Code   |  |  |  |  |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 5 of 56

Debtor 1 Conchetta Larae Dansler

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 6 of 56

Debtor 1 Conchetta Larae Dansler Page 6 of 56 Case number (if known)

| Part | 6: Answer These Questi   | ons for R  | eporting Purposes   |                           |  |   |  |  |  |
|------|--|--|---|---------------------------|--|---|--|--|--|
| 16.  | What kind of debts do you have?                                | 16a.   | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."                |                           |  |   |  |  |  |
|      |  |  | ☐ No. Go to line 16b.   |                           |  |   |  |  |  |
|      |  |  | Yes. Go to line 17.   |                           |  |   |  |  |  |
|      |  | 16b.   | Are your debts primarily be money for a business or inv   |                           |  |   |  |  |  |
|      |  |  | ☐ No. Go to line 16c. ☐ Yes. Go to line 17.   |                           |  |   |  |  |  |
|      |  |  |   |                           |  |   |  |  |  |
|      |  | 16c.   | State the type of debts you   | owe that are not consu    | mer debts or business                                  | s debts   |  |  |  |
| 17.  | Are you filing under<br>Chapter 7?                             | □ No.  | I am not filing under Chapte  | er 7. Go to line 18.      |  |   |  |  |  |
|      | Do you estimate that after any exempt property is excluded and | ■ Yes.   | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? |                           |  |   |  |  |  |
|      | administrative expenses are paid that funds will               |  | ■ No  |                           |  |   |  |  |  |
|      | be available for distribution to unsecured creditors?          |  | □Yes  |                           |  |   |  |  |  |
| 18.  | How many Creditors do  | <b>1</b> -49   |   | <b>1</b> ,000-5,000       | )  | ☐ 25,001-50,000   |  |  |  |
|      | you estimate that you owe?                                     | □ 50-99  |   | <u></u> 5001-10,00        |  | <u></u> 50,001-100,000  |  |  |  |
|      |  | ☐ 100-1  |   | ☐ 10,001-25,0             | 000  | ☐ More than100,000  |  |  |  |
|      |  | 200-9  | 99  |                           |  |   |  |  |  |
| 19.  | How much do you  | <b>\$0 - \$</b>  | 50,000  | □ \$1,000,001             | - \$10 million   | ☐ \$500,000,001 - \$1 billion   |  |  |  |
|      | estimate your assets to be worth?                              | □ \$50,001 - \$100,000   |   |                           | □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 |   |  |  |  |
|      |  |  | 001 - \$500,000<br>001 - \$1 million  |                           | 1 - \$100 million<br>01 - \$500 million                | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion                           |  |  |  |
|      |  | <b>—</b> \$500,  | 001 - \$1 HIIII0H   |                           |  |   |  |  |  |
| 20.  | How much do you  | □ \$0 - \$   | 50,000  | □ \$1,000,001             |  | ☐ \$500,000,001 - \$1 billion   |  |  |  |
|      | estimate your liabilities to be?                               |  | 001 - \$100,000   | \$10,000,00               |  | □ \$1,000,000,001 - \$10 billion  |  |  |  |
|      |  |  | 001 - \$500,000<br>001 - \$1 million  |                           | 1 - \$100 million<br>01 - \$500 million                | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion                           |  |  |  |
|      |  | <b>ப</b> \$500,  | 001 - \$1 million   |                           |  |   |  |  |  |
| Part | :7: Sign Below   |  |   |                           |  |   |  |  |  |
| For  | you  | I have ex  | amined this petition, and I de  | clare under penalty of    | perjury that the inform                                | ation provided is true and correct.   |  |  |  |
|      |  |  | •   | •                         | , , , ,  | under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.         |  |  |  |
|      |  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |   |                           |  |   |  |  |  |
|      |  | I request  | relief in accordance with the   | chapter of title 11, Unit | ed States Code, spec                                   | ified in this petition.   |  |  |  |
|      |  | bankrupt<br>and 3571   | cy case can result in fines up  |                           |  | property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |  |
|      |  |  | chetta Larae Dansler<br>tta Larae Dansler   |                           | Signature of Debtor                                    | 2   |  |  |  |
|      |  |  | e of Debtor 1   |                           | Signature of Debtor                                    | _   |  |  |  |
|      |  | Executed   | lon January 24 2020   |                           | Executed on  |   |  |  |  |
|      |  | Executed on January 21, 2020 Executed on MM / DD / YYYYY MM / DD / YYYYY   |   |                           |  |   |  |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Page 7 of 56 Document Case number (if known)

Debtor 1 Conchetta Larae Dansler

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Karen Ki<br>Signature of | ing<br>Attorney for Debtor | Date          | January 21, 2020<br>MM / DD / YYYY |  |  |  |  |  |
|------------------------------|----------------------------|---------------|------------------------------------|--|--|--|--|--|
| Karen King Printed name      |                            |               |                                    |  |  |  |  |  |
| King & King                  | Law, LLC                   |               |                                    |  |  |  |  |  |
| 215 Pryor S<br>Atlanta, GA   | Street, SW<br>30303-3748   |               |                                    |  |  |  |  |  |
| Number, Street, 0            | City, State & ZIP Code     |               |                                    |  |  |  |  |  |
| Contact phone                | (404) 524-6400             | Email address | notices@kingkingllc.com            |  |  |  |  |  |
|                              | 940309 GA                  |               |                                    |  |  |  |  |  |
| Bar number & Sta             | ate                        |               |                                    |  |  |  |  |  |

# Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 8 of 56

| Fill in this                  | information to identify you  | ur case:                                   |   |  |   |
|-------------------------------|--|--|---|--|---|
| Debtor 1                      | Conchetta Larae  |  |   |  |   |
| 200101                        | First Name   | Middle Name                                | Last Name   |  |   |
| Debtor 2<br>(Spouse if, filir | ng) First Name   | Middle Name                                | Last Name   |  |   |
| United Star                   | tes Bankruptcy Court for the   | NORTHERN DISTRICT                          | Γ OF GEORGIA  |  |   |
| Case numb<br>(if known)       | per  |  |   |  | Check if this is an amended filing                    |
| Statem                        | plete and accurate as poss   | sible. If two married people               | iduals Filing for E   | equally responsible for s                  |   |
| number (if                    | known). Answer every que   | estion.                                    | to this form. On the top of an  | y additional pages, write y                | our name and case                                     |
|                               | Give Details About Your M is your current marital stat                 |  | ou Livea Before   |  |   |
| _                             | farried<br>lot married   |  |   |  |   |
| 2. During                     | g the last 3 years, have you   | ı lived anywhere other tha                 | n where you live now?   |  |   |
| _ N                           | lo.  | ·  | •   |  |   |
| = '                           |  | lived in the last 3 years. Do              | not include where you live nov  | V.   |   |
| Debto                         | or 1 Prior Address:  | Dates Debtor lived there                   | 1 Debtor 2 Prior Ac   | ddress:                                    | Dates Debtor 2<br>lived there                         |
| Apt C                         | North Erwin St<br>C1<br>ersville, GA 30120                             | From-To:<br>2015-2019                      | ☐ Same as Debtor  | 1  | ☐ Same as Debtor 1<br>From-To:                        |
| states and t                  | territories include Arizona, Ca<br>lo<br>es. Make sure you fill out So | alifornia, Idaho, Louisiana, N             | egal equivalent in a commu<br>Nevada, New Mexico, Puerto R<br>Official Form 106H).                      |  |   |
| Part 2                        | Explain the Sources of You   | ur income                                  |   |  |   |
| Fill in t                     | he total amount of income you  | ou received from all jobs and              | ting a business during this y<br>d all businesses, including part<br>sive together, list it only once u | -time activities.                          | llendar years?  |
| _                             | lo<br>es. Fill in the details.   |  |   |  |   |
|                               |  | Debtor 1                                   |   | Debtor 2                                   |   |
|                               |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
|                               |  |  |   |  |   |

Official Form 107

Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Case 20-40161-pwb Page 9 of 56
Case number (if known) Document

Debtor 1 Conchetta Larae Dansler

|   |                          |                                   |  | Debtor 1   |   |  |           | Debtor 2                             |                    |   |
|---|--------------------------|-----------------------------------|--|--|---|--|-----------|--------------------------------------|--------------------|---|
|   |                          |                                   |  | Sources of income<br>Check all that apply.   | (b  | ross income<br>efore deductions and<br>cclusions)  |           | Sources of inco<br>Check all that ap |                    | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: |                          | ■ Wages, commission bonuses, tips | ns,  | \$2,167.00   |   | ☐ Wages, comm<br>bonuses, tips   | nissions, |                                      |                    |   |
|   |                          |                                   |  | ☐ Operating a busine   | SS  |  |           | ☐ Operating a b                      | usiness            |   |
|   | last calen<br>nuary 1 to | dar year:<br>December             | 31, 2019 )   | ■ Wages, commission bonuses, tips  | ns,   | \$39,398.00  |           | ☐ Wages, common bonuses, tips        | nissions,          |   |
|   |                          |                                   |  | ☐ Operating a busine   | SS  |  |           | ☐ Operating a b                      | usiness            |   |
|   |                          | dar year be<br>December           |  | ■ Wages, commission bonuses, tips  | ns,   | \$39,000.00  |           | ☐ Wages, comn<br>bonuses, tips       | nissions,          |   |
|   |                          |                                   |  | ☐ Operating a busine   | SS  |  |           | ☐ Operating a b                      | usiness            |   |
|   | winnings.  List each s   | If you are fili                   | ng a joint cas   | pensions; rental income<br>e and you have income<br>me from each source so   | that you re   | eceived together, list i   | t only    | y once under Deb                     | otor 1.            | gambling and lottery                                  |
|   |                          |                                   |  | Debtor 1   | obtor 1   |  |           | Debtor 2                             |                    |   |
|   |                          |                                   |  | Sources of income Describe below.  | ea<br>(b  | ross income from<br>ach source<br>efore deductions and<br>cclusions)                               |           | Sources of inco Describe below.      | me                 | Gross income<br>(before deductions<br>and exclusions) |
| Par   | 1 3: List                | Certain Pa                        | vments You   | Made Before You File   |   | ,  |           |                                      |                    |   |
| 6.  | Are either □ No.         | Neither De                        | ebtor 1 nor E<br>primarily for a<br>90 days befo<br>Go to line 7<br>List below e<br>paid that cr | s debts primarily considebtor 2 has primarily of personal, family, or hours you filed for bankrupt.  each creditor to whom you deditor. Do not include papayments to an attorner | consumer usehold purcey, did you but paid a to ayments fo | debts. Consumer de rpose."  u pay any creditor a to otal of \$6,825* or more r domestic support ob | otal o    | of \$6,825* or more                  | e?<br>ments and th | e total amount you                                    |
|   | _                        | •                                 | to adjustmen   | on 4/01/22 and every 3   | years afte  | er that for cases filed o  | on or     | after the date of                    | adjustment.        |   |
|   | Yes.                     |                                   |  | r both have primarily or<br>re you filed for bankrup   |   |  | otal o    | of \$600 or more?                    |                    |   |
|   |                          | ■ No.                             | Go to line 7   |  |   |  |           |                                      |                    |   |
|   |                          | ☐ Yes                             | include pay  | each creditor to whom you ments for domestic supportion this bankruptcy case.  |   |  |           |                                      |                    |   |
|   | Creditor'                | s Name and                        | l Address  | Dates of p   | ayment  | Total amount paid  |           | Amount you still owe                 | Was this p         | ayment for  |

Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 10 of 56 Case number (if known) Case 20-40161-pwb

Debtor 1 Conchetta Larae Dansler

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |  |                     |                      |                         |                              |  |  |  |
|-----|--|--|---------------------|----------------------|-------------------------|------------------------------|--|--|--|
|     | ☐ Yes. List all payments to an insider.  |  |                     |                      |                         |                              |  |  |  |
|     | Insider's Name and Address   | Dates of payment                             | Total amount paid   | Amount you still owe | Reason for              | this payment                 |  |  |  |
| 3.  | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi  No  |  | ments or transfer a | ny property on a     | ccount of a de          | ebt that benefited an        |  |  |  |
|     | Yes. List all payments to an insider   |  |                     |                      |                         |                              |  |  |  |
|     | Insider's Name and Address   | Dates of payment                             | Total amount paid   | Amount you still owe | Reason for Include cred | this payment<br>litor's name |  |  |  |
| Par | t 4: Identify Legal Actions, Repossession  | s. and Foreclosures                          |                     |                      |                         |                              |  |  |  |
| Э.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number   |  |                     |                      |                         | t or custody                 |  |  |  |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.   |  | rty repossessed, f  | oreclosed, garnis    | hed, attached           | d, seized, or levied?        |  |  |  |
|     | Creditor Name and Address  | Describe the Property  Explain what happened |                     | Date                 |                         | Value of the<br>property     |  |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.  |  | uding a bank or fir | nancial institution  | , set off any a         | mounts from your             |  |  |  |
|     | Creditor Name and Address  | Describe the action the                      | creditor took       | Date taken           | action was              | Amount                       |  |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar  ■ No □ Yes  |  | rty in the possess  |                      |                         | efit of creditors, a         |  |  |  |
| Par | t 5: List Certain Gifts and Contributions  |  |                     |                      |                         |                              |  |  |  |
|     | Within 2 years before you filed for bankrupt  ■ No □ Yes. Fill in the details for each gift.   | ccy, did you give any gifts                  | with a total value  | of more than \$60    | 0 per person'           | ?                            |  |  |  |
|     | Gifts with a total value of more than \$600 per person   | Describe the gifts                           |                     | Dates<br>the g       | you gave<br>fts         | Value                        |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |  |                     |                      |                         |                              |  |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 11 of 56 Case number (if known)

| 4.  | Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or  |   | u give any gifts or contribution  | ns with a total | I value of more than                    | \$600 to any charity?                |
|-----|---|---|---|-----------------|---|--------------------------------------|
|     | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod  | total Des   | cribe what you contributed  |                 | Dates you contributed                   | Value                                |
| Par | t 6: List Certain Losses  |   |   |                 |   |                                      |
| 5.  | Within 1 year before you filed for bankroor gambling?   | uptcy or since                                      | you filed for bankruptcy, did y   | you lose anytl  | hing because of thef                    | t, fire, other disaster              |
|     | □ No  |   |   |                 |   |                                      |
|     | Yes. Fill in the details.   |   |   |                 |   |                                      |
|     | Describe the property you lost and how the loss occurred  | Include the a                                       | y insurance coverage for the lemont that insurance has paid. It ims on line 33 of Schedule A/B: | List pending    | Date of your loss                       | Value of property<br>lost            |
|     | computer damaged in storage,<br>material stolen while debtor was<br>homeless.   |   |   |                 | 2019                                    | \$2,500.00                           |
|     | Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address                      | uptcy, did you<br>preparing a b<br>preparers, or co | ankruptcy petition?   | rvices required |   | rty to anyone you  Amount of payment |
|     | Email or website address<br>Person Who Made the Payment, if Not   |   | Sicircu   |                 | made                                    | payment                              |
| 17. | Within 1 year before you filed for bankri promised to help you deal with your cree Do not include any payment or transfer that I No  Yes. Fill in the details.  | editors or to m                                     | ake payments to your creditor   |                 | r transfer any prope                    | rty to anyone who                    |
|     | Person Who Was Paid<br>Address  |   | cription and value of any prop<br>sferred   | perty           | Date payment<br>or transfer was<br>made | Amount of payment                    |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al  No Yes. Fill in the details. | ur business on<br>rs made as sec                    | r <b>financial affairs?</b><br>urity (such as the granting of a s                               |                 |   |                                      |
|     | Person Who Received Transfer<br>Address   | Des<br>prop   | cription and value of<br>perty transferred  |                 | any property or received or debts       | Date transfer was made               |
|     | Person's relationship to you  |   |   | paid iii ext    | Silaliye                                |                                      |

Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Case 20-40161-pwb Page 12 of 56 Case number (if known) Document

Debtor 1 Conchetta Larae Dansler

| 19. | beneficiary? (These are often called asset-protein No   |  | property to a self-sett       | ed trust or similar device o                         | f which you are a                             |  |  |
|-----|---|--|-------------------------------|--|---|--|--|
|     | ☐ Yes. Fill in the details.   |  |                               |  |   |  |  |
|     | Name of trust   | Description and val  | lue of the property trai      | nsferred   | Date Transfer was made                        |  |  |
| Pa  | rt 8: List of Certain Financial Accounts, Instr   | uments, Safe Deposit E   | Boxes, and Storage Un         | its  |   |  |  |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No | other financial account  | s; certificates of depo       | •  |   |  |  |
|     | Yes. Fill in the details.   |  |                               |  |   |  |  |
|     |   | _  | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables?  | ar before you filed for b  | ankruptcy, any safe d         | eposit box or other deposit                          | ory for securities,                           |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                               |  |   |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acces Address (Number, Stre State and ZIP Code)                 |                               | e the contents                                       | Do you still have it?                         |  |  |
| 22. | Have you stored property in a storage unit or p   | place other than your h  | ome within 1 year bef         | ore you filed for bankruptc                          | /?  |  |  |
|     | No  |  |                               |  |   |  |  |
|     | Yes. Fill in the details.   |  |                               |  |   |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or ha<br>to it?<br>Address (Number, Stre<br>State and ZIP Code) |                               | e the contents                                       | Do you still have it?                         |  |  |
| Pai | rt 9: Identify Property You Hold or Control fo  | r Someone Else   |                               |  |   |  |  |
| 23. |   |  | le any property you bo        | rrowed from, are storing fo                          | or, or hold in trust                          |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                               |  |   |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prope<br>(Number, Street, City, Sta<br>Code)                    |                               | e the property                                       | Value   |  |  |
| Pa  | rt 10: Give Details About Environmental Inform  | mation   |                               |  |   |  |  |
| For | the purpose of Part 10, the following definition  | s apply:   |                               |  |   |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su                               | air, land, soil, surface   | water, groundwater, o         |  |   |  |  |
|     | Site means any location, facility, or property a to own, operate, or utilize it, including disposa  |  | vironmental law, whet         | her you now own, operate,                            | or utilize it or used                         |  |  |
|     | Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or  |  | a hazardous waste, h          | azardous substance, toxic                            | substance,                                    |  |  |

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 13 of 56 Case number (if known) Case 20-40161-pwb

Debtor 1 Conchetta Larae Dansler

| 24. | Has   | any governmental unit notified you that  | der or in violation of an environm   | ental law? |   |                    |  |  |  |
|-----|---|--|--|------------|---|--------------------|--|--|--|
|     |   | es. Fill in the details.   |  |            |   |                    |  |  |  |
|     |   | me of site dress (Number, Street, City, State and ZIP Code)                      | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | d          | Environmental law, if you know it                               | Date of notice     |  |  |  |
| 25. | Hav   | e you notified any governmental unit of  | any release of hazardous material?   |            |   |                    |  |  |  |
|     |   | ■ No □ Yes. Fill in the details.   |  |            |   |                    |  |  |  |
|     |   | me of site<br>dress (Number, Street, City, State and ZIP Code)                   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | d          | Environmental law, if you know it                               | Date of notice     |  |  |  |
| 26. | Hav   | e you been a party in any judicial or adn  | ninistrative proceeding under any envi                                     | ironi      | mental law? Include settlements                                 | and orders.        |  |  |  |
|     |   | No<br>Yes. Fill in the details.  |  |            |   |                    |  |  |  |
|     |   | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Na         | ture of the case  | Status of the case |  |  |  |
| Par | t 11:   | Give Details About Your Business or  | Connections to Any Business  |            |   |                    |  |  |  |
| 27. | Witl  | nin 4 years before you filed for bankrupt  | cy, did you own a business or have an                                      | ny of      | the following connections to any                                | / business?        |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |  |  |            |   |                    |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)                        |  |  |            |   |                    |  |  |  |
|     |   | ☐ A partner in a partnership   |  |            |   |                    |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation  |  |  |            |   |                    |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                 |  |  |            |   |                    |  |  |  |
|     | ■ No. None of the above applies. Go to Part 12.   |  |  |            |   |                    |  |  |  |
|     |   | Yes. Check all that apply above and fill   | in the details below for each business                                     | s.         |   |                    |  |  |  |
|     |   | siness Name<br>dress   | Describe the nature of the business  |            | Employer Identification numbe                                   |                    |  |  |  |
|     |   | mber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   |            | Do not include Social Security number of Dates business existed |                    |  |  |  |
| 28. |   | nin 2 years before you filed for bankrupt itutions, creditors, or other parties. | cy, did you give a financial statement                                     | to aı      | nyone about your business? Inclu                                | ude all financial  |  |  |  |
|     |   | No<br>Yes. Fill in the details below.  |  |            |   |                    |  |  |  |
|     | Name Date Issued Address (Number, Street, City, State and ZIP Code)   |  |  |            |   |                    |  |  |  |
|     |   |  |  |            |   |                    |  |  |  |

Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Case 20-40161-pwb Page 14 of 56
Case number (if known) Document

Debtor 1 Conchetta Larae Dansler

| Part 12: Sign Below  |  |                         |
|--|--|-------------------------|
| are true and correct. I understand that make                 | of Financial Affairs and any attachments, and I declare under pricing a false statement, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20 years, or both. |                         |
| /s/ Conchetta Larae Dansler                                  |  |                         |
| Conchetta Larae Dansler<br>Signature of Debtor 1             | Signature of Debtor 2  | _                       |
| Date January 21, 2020  | Date   | _                       |
| Did you attach additional pages to <i>Your St</i> ■ No □ Yes | atement of Financial Affairs for Individuals Filing for Bankrupto  | ry (Official Form 107)? |
| Did you pay or agree to pay someone who ■ No                 | is not an attorney to help you fill out bankruptcy forms?  |                         |
| ☐ Yes. Name of Person . Attach the E                         | Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Of  | fficial Form 119).      |

| Ous  | C 20 40101 pwb  | Document Page 15 of  | 56  | DC30 Main   |
|--|---|--|---|---|
| ill in this info                                     | rmation to identify your ca   |  |   |   |
| Debtor 1   | Conchetta Larae Da  | nsler  |   |   |
|  | First Name  | Middle Name Last Name  |   |   |
| Debtor 2<br>Spouse, if filing)                       | First Name  | Middle Name Last Name  |   |   |
| Inited States B                                      | ankruptov Court for the   | ORTHERN DISTRICT OF GEORGIA  |   |   |
| mileu States D                                       | ankruptcy Court for the.  | OKTIEKN DISTRICT OF GEORGIA  |   |   |
| Case number  |   |  |   | ☐ Check if this is an amended filing              |
| Official Fo  | orm 106A/B  |  |   |   |
|  | le A/B: Prope   | rty  |   | 12/15   |
| ink it fits best.<br>formation. If monswer every que | Be as complete and accurate<br>ore space is needed, attach a sestion. | tems. List an asset only once. If an asset fits in mon<br>as possible. If two married people are filing together<br>separate sheet to this form. On the top of any addition<br>and, or Other Real Estate You Own or Have an Inter- | r, both are equally responsible for sional pages, write your name and cas | upplying correct                                  |
| Do you own or  | have any legal or equitable in  | nterest in any residence, building, land, or similar pr  | operty?   |   |
| ■ No. Go to Pa                                       | art 2.  |  |   |   |
| ☐ Yes. Where   | is the property?  |  |   |   |
|  |   |  |   |   |
|  |   |  |   |   |
| Part 2: Describe                                     | e Your Vehicles   |  |   |   |
| Cars, vans, t □ No                                   | rucks, tractors, sport utili  | ry vehicles, motorcycles   |   |   |
| ■ Yes  |   |  |   |   |
| 3.1 Make:  | Jeep  | Who has an interest in the property? Check o   |   | laims or exemptions. Put                          |
| Model:   | Renegade  | Debtor 1 only  | the amount of any secur   | ed claims on Schedule D: ims Secured by Property. |
| Year:  | 2018  | Debtor 2 only  | Current value of the  |   |
| Approxima  | ate mileage: 3300   | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?                                  |
| Other info   | rmation:  | At least one of the debtors and another  |   |   |
| Vehicle  |   | Check if this is community property (see instructions)   | \$13,700.00   | \$13,700.00                                       |
|  |   | 's and other recreational vehicles, other vehic<br>al watercraft, fishing vessels, snowmobiles, motor  |   |   |
| ■ No   |   |  |   |   |
| □ Yes  |   |  |   |   |
|  |   |  |   |   |
|  |   |  |   |   |
| Add the doll<br>pages you h                          | lar value of the portion you<br>nave attached for Part 2. W           | u own for all of your entries from Part 2, include it that number here   | ding any entries for  | \$13,700.00                                       |
| Part 3: Describe                                     | e Your Personal and Househ  | old Items  |   |   |
|  |   | le interest in any of the following items?   |   | Current value of the portion you own?             |

Do not deduct secured claims or exemptions.

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Page 16 of 56
Case number (if known) Document Debtor 1 Conchetta Larae Dansler 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$0.00 Household Goods 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$0.00 Clothing and Shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

for Part 3. Write that number here .....

Current value of the portion you own?
Do not deduct secured claims or exemptions.

\$0.00

Page 17 of 56
Case number (if known) Document Debtor 1 Conchetta Larae Dansler 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No \$0.00 Cash on Hand 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Account with Family Savings Credit Union \$60.00 Checking & Savings 17.2. Checking & Savings Account With Coosa Valley \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401k Retirement Account \$2,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

Official Form 106A/B Schedule A/B: Property page 3

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

☐ Yes.....

Case 20-40161-pwb

Doc 1

Filed 01/21/20

Entered 01/21/20 17:54:31

|    |                        |        |           |                         | 61-pwb              | Doc 1          | Filed 01/2<br>Document                 |          | Entered (<br>age 18 of 5 | 6                    |               | Desc Main   |
|----|------------------------|--------|-----------|-------------------------|---------------------|----------------|--|----------|--------------------------|----------------------|---------------|---|
| D  | ebtor 1                |        | Conche    | etta Lara               | e Dansler           |                |  |          |                          | Case number (        | if known)     |   |
| 25 | . Trust<br>■ No        | s, ec  | quitable  | or futui                | re interests        | in property    | (other than any                        | thing li | sted in line 1), a       | and rights or pov    | wers exercis  | able for your benefit   |
|    | ☐ Yes                  | s. Gi  | ve spec   | cific inforr            | mation abou         | it them        |  |          |                          |                      |               |   |
| 26 |                        |        |           |                         |                     |                | and other intell<br>ceeds from royalti |          |                          | nents                |               |   |
|    |                        | s. Gi  | ve spec   | cific inforr            | mation abou         | it them        |  |          |                          |                      |               |   |
| 27 | Exar<br>■ No           | nples  | : Buildi  | ng permi                | ts, exclusive       |                | ibles<br>poperative associ             | ation ho | oldings, liquor lice     | enses, profession    | nal licenses  |   |
|    | ☐ Yes                  | s. Gi  | ve spec   | cific inforr            | mation abou         | it them        |  |          |                          |                      |               |   |
| M  | oney o                 | r pro  | perty (   | owed to                 | you?                |                |  |          |                          |                      |               | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 |                        | efun   | ds owe    | ed to you               | I                   |                |  |          |                          |                      |               |   |
|    | ■ No<br>□ Yes          | s. Giv | e spec    | ific inforn             | nation about        | t them, includ | ding whether you                       | already  | filed the returns        | and the tax years    | S             |   |
| 29 | ■ No                   | nples  | s: Past o |                         | mp sum alin         | nony, spousa   | al support, child s                    | upport,  | maintenance, div         | vorce settlement,    | property sett | lement  |
|    | <b>□</b> 163           | 5. OIV | re spec   |                         | nation              |                |  |          |                          |                      |               |   |
| 30 | Exar                   |        | : Unpa    | id wages                |                     |                |  | benefits | s, sick pay, vacat       | ion pay, workers     | s' compensati | on, Social Security   |
|    | ■ No                   | s. Gi  | ve spec   | cific inforr            | mation              |                |  |          |                          |                      |               |   |
| 31 |                        |        |           | rance po<br>h, disabili |                     | surance; hea   | alth savings accou                     | ınt (HS/ | A); credit, homeo        | wner's, or renter'   | 's insurance  |   |
|    |                        | s. Na  | me the    | insuranc                | e company<br>Compan |                | cy and list its valu                   | e.       | Benefic                  | ciary:               |               | Surrender or refund value:  |
| 32 | If you                 | u are  |           | neficiary               |                     |                | omeone who has<br>proceeds from a li   |          | ance policy, or ar       | re currently entitle | ed to receive | property because  |
|    | ■ No                   | s. Gi  | ve spec   | cific inforr            | mation              |                |  |          |                          |                      |               |   |
| 33 |                        |        |           |                         |                     |                | u have filed a lav                     |          |                          | d for payment        |               |   |
|    | ■ No                   | s. De  | escribe   | each clai               | im                  |                |  |          |                          |                      |               |   |
| 34 | . Othe                 |        |           |                         |                     | claims of ev   | ery nature, inclu                      | ıding c  | ounterclaims of          | the debtor and       | rights to set | off claims  |
|    | ■ No                   | s. De  | escribe   | each clai               | im                  |                |  |          |                          |                      |               |   |
| 35 | . <b>Any</b> f<br>■ No |        | cial as   | sets you                | did not alr         | eady list      |  |          |                          |                      |               |   |

 $\square$  Yes. Give specific information..

Filed 01/21/20

|                   | Case 20-40101-pwb  | Document                  | Page 19 of 56                           |            |
|-------------------|--|---------------------------|---|------------|
| Debtor 1          | Conchetta Larae Dansler  |                           | Case number (if know                    | vn)        |
|                   | the dollar value of all of your entries fr<br>art 4. Write that number here                      |                           | any entries for pages you have attached | \$2,060.00 |
| Part 5: De        | escribe Any Business-Related Property You  | ı Own or Have an Interes  | t In. List any real estate in Part 1.   |            |
| 37. <b>Do you</b> | own or have any legal or equitable interest  | in any business-related   | property?                               |            |
| No. G             | o to Part 6.   |                           |   |            |
| ☐ Yes.            | Go to line 38.   |                           |   |            |
|                   | escribe Any Farm- and Commercial Fishing-<br>you own or have an interest in farmland, list it ir |                           | wn or Have an Interest In.              |            |
| 46. <b>Do yo</b>  | u own or have any legal or equitable in  | nterest in any farm- or   | commercial fishing-related property?    |            |
| ■ No              | . Go to Part 7.  |                           |   |            |
| ☐ Yes             | s. Go to line 47.  |                           |   |            |
| Part 7:           | Describe All Property You Own or Have a  | an Interest in That You D | id Not List Above                       |            |
|                   | u have other property of any kind you oples: Season tickets, country club members                |                           |   |            |
|                   | Give specific information  |                           |   |            |
| 54. <b>Add</b>    | the dollar value of all of your entries fr   | rom Part 7. Write that    | number here                             | \$0.00     |
| Part 8:           | List the Totals of Each Part of this Form  |                           |   |            |
| 55. <b>Part</b>   | 1: Total real estate, line 2   |                           |   | \$0.00     |
| 56. <b>Part</b>   | 2: Total vehicles, line 5  |                           | \$13,700.00                             | _          |

\$0.00

\$0.00

\$0.00

\$0.00

Copy personal property total

\$2,060.00

\$15,760.00

Official Form 106A/B Schedule A/B: Property page 5

Part 3: Total personal and household items, line 15

Part 6: Total farm- and fishing-related property, line 52

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 4: Total financial assets, line 36

57.

59.

60.

61.

\$15,760.00

\$15,760.00

| Fill in this infor  | rmation to identify your | case:             |            |                                      |
|---------------------|--------------------------|-------------------|------------|--------------------------------------|
| Debtor 1            | Conchetta Larae D        | Dansler           |            |                                      |
|                     | First Name               | Middle Name       | Last Name  |                                      |
| Debtor 2            |                          |                   |            |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name  |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA |                                      |
| Case number         |                          |                   |            | Charletthia is an                    |
| (II KIIOWII)        |                          |                   |            | ☐ Check if this is an amended filing |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption |
|--|--------------------------------------|--|
|  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                               |
| 2018 Jeep Renegade 33000 miles<br>Vehicle  | \$13,700.00                          | \$0.00 O.C.G.A. § 44-13-100(a)(3)                                    |
| Line from Schedule A/B: 3.1  |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Household Goods Line from Schedule A/B: 6.1  | \$0.00                               | © \$0.00 O.C.G.A. § 44-13-100(a)(4)                                  |
| Ellio IIolii osilodale /v.Z. el l  |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Clothing and Shoes Line from Schedule A/B: 11.1  | \$0.00                               | \$0.00 O.C.G.A. § 44-13-100(a)(4)                                    |
| Ellio IIolii osilodale /v.Z. T.T.  |                                      | ☐ 100% of fair market value, up to any applicable statutory limit    |
| Cash on Hand Line from Schedule A/B: 16.1  | \$0.00                               | \$0.00 O.C.G.A. § 44-13-100(a)(6)                                    |
|  |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Checking & Savings: Account with Family Savings Credit Union                           | \$60.00                              | \$60.00 O.C.G.A. § 44-13-100(a)(6)                                   |
| Line from Schedule A/B: 17.1   |                                      | □ 100% of fair market value, up to any applicable statutory limit    |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 21 of 56

Conchetta Larae Dansler Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Schedule A/B that lists this property Copy the value from Check only one box for each exemption. Schedule A/B Checking & Savings: Account WIth O.C.G.A. § 44-13-100(a)(6) \$0.00 \$0.00 Coosa Valley 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit 401k: Retirement Account O.C.G.A. § 44-13-100(a)(2)(E) \$2,000.00 \$2,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

| Case                                   | 20-40161-pwi             | Document Page 2   | 2 of 26<br>6160 01/21/20 1                             | .7.54.31 Desi                                | Jiviaiii                    |
|--|--------------------------|---|--|--|-----------------------------|
| Fill in this inform                    | ation to identify you    |   | 2 01 30  |  |                             |
| Debtor 1                               | Conchetta Larae          | a Dansler   |  |  |                             |
| Bestor 1                               | First Name               | Middle Name Last Name   |  |  |                             |
| Debtor 2<br>(Spouse if, filing)        | First Name               | Middle Name Last Name   |  |  |                             |
| United States Ban                      | kruptcy Court for the    | : NORTHERN DISTRICT OF GEORGIA  |  |  |                             |
| Case number                            |                          |   |  | _  | if this is an<br>ded filing |
| Official Form                          |                          |   |  |  |                             |
| Schedule [                             | D: Creditors             | s Who Have Claims Secure  | d by Propert   | У  | 12/15                       |
| is needed, copy the number (if known). |                          | If two married people are filing together, both are e out, number the entries, and attach it to this form. (  |  |  |                             |
| ☐ No. Check                            | this box and submit t    | his form to the court with your other schedules. \  | You have nothing else t                                | o report on this form.                       |                             |
| Yes. Fill in a                         | all of the information   | below.  |  |  |                             |
|  | Secured Claims           |   |  |  |                             |
|  |                          | more than one secured claim, list the creditor separate   | Column A   | Column B                                     | Column C                    |
| for each claim. If mo                  | re than one creditor has | in the trial one secured claim, list the creditors in Part 2. As ical order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any    |
| 2.1 COOSA VA                           | ALLEY CREDIT             | Describe the property that secures the claim:   | \$25,660.00  | \$13,700.00                                  | \$11,960.00                 |
| Creditor's Name                        |                          | 2018 Jeep Renegade 33000 miles<br>Vehicle   |  |  |                             |
| 2010 REDN<br>CI ROME, (                | -                        | As of the date you file, the claim is: Check all that apply.  Contingent                                      |  |  |                             |
| Number, Street, 0                      | City, State & Zip Code   | ☐ Unliquidated  |  |  |                             |
| Who owes the deb                       | ot? Check one.           | ☐ Disputed  Nature of lien. Check all that apply.   |  |  |                             |
| ■ Debtor 1 only                        |                          | ☐ An agreement you made (such as mortgage or se   | ecured   |  |                             |
| Debtor 2 only                          |                          | car loan)   |  |  |                             |
| Debtor 1 and Deb                       | otor 2 only              | ☐ Statutory lien (such as tax lien, mechanic's lien)  |  |  |                             |
| ☐ At least one of the                  | e debtors and another    | ☐ Judgment lien from a lawsuit  |  |  |                             |
| Check if this cla                      |                          | Other (including a right to offset)   |  |  |                             |

Last 4 digits of account number

1846

Opened 5/25/2018 Last Active

Date debt was incurred 10/30/2019

## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 23 of 56

| Debt | tor 1 Conchetta Larae Dansler                                   |  | Case number (if known) |        |            |  |  |
|------|---|--|------------------------|--------|------------|--|--|
|      | First Name Middle N   | ame Last Name  | _                      |        |            |  |  |
| 2.2  | REGIONAL FINANCE  | Describe the property that secures the claim:                            | \$3,691.00             | \$0.00 | \$3,691.00 |  |  |
|      | Creditor's Name   | Secured Loan   | ]                      |        |            |  |  |
|      | 1200 ERNEST W<br>BARRETT PY 216<br>KENNESAW, GA 30144           | As of the date you file, the claim is: Check all that apply.  Contingent | ,                      |        |            |  |  |
|      | Number, Street, City, State & Zip Code                          | ☐ Unliquidated   |                        |        |            |  |  |
| Who  | owes the debt? Check one.                                       | ☐ Disputed  Nature of lien. Check all that apply.                        |                        |        |            |  |  |
|      | ebtor 1 only<br>ebtor 2 only                                    | ☐ An agreement you made (such as mortgage or car loan)                   | secured                |        |            |  |  |
|      | ebtor 1 and Debtor 2 only                                       | ☐ Statutory lien (such as tax lien, mechanic's lien                      | 1)                     |        |            |  |  |
| □ A  | t least one of the debtors and another                          | ☐ Judgment lien from a lawsuit   |                        |        |            |  |  |
|      | heck if this claim relates to a community debt                  | Other (including a right to offset) ucc lien                             |                        |        |            |  |  |
| Date | debt was incurred 10/25/2019                                    | Last 4 digits of account number  | 16                     |        |            |  |  |
|      |   |  |                        |        |            |  |  |
| Ad   | d the dollar value of your entries in C                         | column A on this page. Write that number here:                           | \$29,351.00            |        |            |  |  |
|      | his is the last page of your form, add<br>ite that number here: | the dollar value totals from all pages.                                  | \$29,351.00            |        |            |  |  |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                                    |   | Document  | Page                            | 24 of 5      | 56                       |                    |                        |
|------------------------------------|---|---|---------------------------------|--------------|--------------------------|--------------------|------------------------|
| Fill in this info                  | rmation to identify your case:  |   |                                 |              |                          |                    |                        |
| Debtor 1                           | Conchetta Larae Dansle  | r   |                                 |              |                          |                    |                        |
|                                    | First Name  | Middle Name   | Last Name                       | 9            |                          |                    |                        |
| Debtor 2                           |   |   |                                 |              |                          |                    |                        |
| (Spouse if, filing)                | First Name  | Middle Name   | Last Name                       | 9            |                          |                    |                        |
| United States B                    | ankruptcy Court for the: NOR  | RTHERN DISTRICT OF G  | EORGIA                          |              |                          |                    |                        |
| Case number                        |   |   |                                 |              |                          |                    |                        |
| (if known)                         |   |   |                                 |              |                          | ☐ Che              | eck if this is an      |
|                                    |   |   |                                 |              |                          | am                 | ended filing           |
| ~                                  |   |   |                                 |              |                          |                    |                        |
| Official For                       |   |   | _                               |              |                          |                    |                        |
|                                    | E/F: Creditors Who Ind accurate as possible. Use Part   |   |                                 |              |                          |                    | 12/15                  |
| Schedule D: Cred                   | cutory Contracts and Unexpired Le<br>itors Who Have Claims Secured by<br>ontinuation Page to this page. If yo<br>umber (if known).                                    | Property. If more space is                                    | needed, co                      | py the Part  | you need, fill it out, i | number the entri   | es in the boxes on the |
| Part 1: List                       | All of Your PRIORITY Unsecur  | ed Claims   |                                 |              |                          |                    |                        |
| 1. Do any credi                    | tors have priority unsecured claim  | s against you?  |                                 |              |                          |                    |                        |
| ☐ No. Go to                        | Part 2.   |   |                                 |              |                          |                    |                        |
| Yes.                               |   |   |                                 |              |                          |                    |                        |
| identify what to possible, list to | ur priority unsecured claims. If a ci<br>type of claim it is. If a claim has both<br>the claims in alphabetical order accor<br>e than one creditor holds a particular | priority and nonpriority amounding to the creditor's name. If | nts, list that of<br>you have m | laim here a  | nd show both priority a  | nd nonpriority am  | ounts. As much as      |
| (For an expla                      | nation of each type of claim, see the   | instructions for this form in the                             | e instruction                   | booklet.)    | Total claim              | Briarity           | Nonnriarity            |
|                                    |   |   |                                 |              | i otai ciaim             | Priority<br>amount | Nonpriority amount     |
| 2.1 Georgi                         | a Department of Revenue   | Last 4 digits of accou  | ınt number                      | SSN          | \$0.00                   | \$0.               | .00 \$0.00             |
| 1800 C                             | Creditor's Name<br>Century Blvd NE Suite 910<br>a, GA 30345   | When was the debt in  | ocurred?                        |              |                          |                    |                        |
|                                    | Street City State Zip Code  | As of the date you file                                       | e, the claim                    | is: Check a  | II that apply            |                    |                        |
| Who incurr                         | ed the debt? Check one.   | ☐ Contingent  |                                 |              |                          |                    |                        |
| Debtor 1                           | only  | ☐ Unliquidated  |                                 |              |                          |                    |                        |
| Debtor 2                           | only :  | ☐ Disputed  |                                 |              |                          |                    |                        |
| Debtor 1                           | and Debtor 2 only   | Type of PRIORITY un   | secured cla                     | im:          |                          |                    |                        |
| ☐ At least of                      | one of the debtors and another  | ☐ Domestic support o  | bligations                      |              |                          |                    |                        |
| ☐ Check if                         | f this claim is for a community del   | Taxes and certain o   | other debts y                   | ou owe the   | government               |                    |                        |
| Is the claim                       | subject to offset?  | ☐ Claims for death or   | personal inj                    | ury while yo | u were intoxicated       |                    |                        |
| ■ No                               |   | ☐ Other. Specify  |                                 |              |                          |                    |                        |
| ☐ Yes                              |   |   | axes                            |              |                          |                    |                        |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 25 of 56

| Debtor 1 Conchetta Larae Dansler   |   | Case number (if known)  |                                 |
|--|---|---|---------------------------------|
| 2.2 IRS Priority Creditor's Name Centralized Insolvency Operations P.O. Box 7346   | Last 4 digits of account number S When was the debt incurred?                                       | SN \$8,000.00   | \$0.00 \$8,000.00               |
| Philadelphia, PA 19101-7346  Number Street City State Zip Code  Who incurred the debt? Check one.  | As of the date you file, the claim is:  | Check all that apply  |                                 |
| ■ Debtor 1 only  | ☐ Contingent  |   |                                 |
| _  | ☐ Unliquidated  |   |                                 |
| Debtor 2 only  | ☐ Disputed  Type of PRIORITY unsecured claim:   |   |                                 |
| ☐ Debtor 1 and Debtor 2 only   | Domestic support obligations  |   |                                 |
| At least one of the debtors and another  | _   |   |                                 |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?  | <ul><li>■ Taxes and certain other debts you</li><li>□ Claims for death or personal injury</li></ul> | •   |                                 |
| ■ No   | Other. Specify  |   |                                 |
| Yes  | Taxes   |   |                                 |
| <ul> <li>☑ No. You have nothing to report in this part. Submit</li> <li>☑ Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.</li> </ul> | alphabetical order of the creditor who laim. For each claim listed, identify what                   | o holds each claim. If a creditor has mo<br>type of claim it is. Do not list claims alrea | ady included in Part 1. If more |
| rait 2.  |   |   | Total claim                     |
| ACCEPTANCE RENTALS, Nonpriority Creditor's Name  | Last 4 digits of account number   | 1846  | \$0.00                          |
| 2850 Hog Mountain Rd Ste 201<br>Dacula, GA 30019   | When was the debt incurred?   | Opened 12/18/2016 Last Acti<br>3/1/2017   | ve                              |
| Number Street City State Zip Code Who incurred the debt? Check one.  | As of the date you file, the claim  | is: Check all that apply  |                                 |
| Debtor 1 only  | ☐ Contingent  |   |                                 |
| Debtor 2 only  | ☐ Unliquidated  |   |                                 |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |                                 |
| $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecure  | d claim:  |                                 |
| $\square$ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sepa   | aration agreement or divorce that you did   | d not                           |
| Is the claim subject to offset?  | report as priority claims   |   |                                 |
| No   | ☐ Debts to pension or profit-sharir   | ng plans, and other similar debts   |                                 |
| ☐ Yes  | Other Specify Lease   |   |                                 |

Page 26 of 56 Case number (if known) Document Debtor 1 Conchetta Larae Dansler

| 4.2 | BLOOMINGDALES DEPARTMENT  | Last 4 digits of account number                              | 1846  | \$728.00 |
|-----|---|--|---|----------|
|     | Nonpriority Creditor's Name   |  | Opened 11/28/2017 Last Active                 |          |
|     | PO BOX 8218   | When was the debt incurred?                                  | 9/20/2019                                     |          |
|     | MASON, OH 45040   |  |   |          |
|     | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |          |
|     | ■ Debtor 1 only   | ☐ Contingent   |   |          |
|     | ☐ Debtor 2 only   | ☐ Unliquidated   |   |          |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |          |
|     | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
|     | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |          |
|     | debt  |  | aration agreement or divorce that you did not |          |
|     | Is the claim subject to offset?                                     | report as priority claims                                    |   |          |
|     | No  | Debts to pension or profit-sharing                           |   |          |
|     | Yes   | Other. Specify Charge Acc                                    | ount  |          |
| 4.3 | CAPITAL ONE BANK USA NA Nonpriority Creditor's Name                 | Last 4 digits of account number                              | 1846  | \$586.00 |
|     |   |  | Opened 10/18/2016 Last Active                 |          |
|     | PO BOX 30281<br>SALT LAKE CITY, UT 84130                            | When was the debt incurred?                                  | 10/11/2019                                    |          |
|     | Number Street City State Zip Code                                   | As of the date you file, the claim                           | is: Check all that apply                      |          |
|     | Who incurred the debt? Check one.                                   | -  |   |          |
|     | Debtor 1 only   | ☐ Contingent   |   |          |
|     | Debtor 2 only   | ☐ Unliquidated   |   |          |
|     | Debtor 1 and Debtor 2 only  | Disputed   |   |          |
|     | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
|     | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |          |
|     | debt<br>Is the claim subject to offset?                             | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|     | ■ No  | ☐ Debts to pension or profit-sharing                         | ng plans, and other similar debts             |          |
|     | Yes   | Other. Specify Credit Card                                   |   |          |
| 4.4 | CHRYSLER CAPITAL  | Last 4 digits of account number                              | 1846  | \$0.00   |
|     | Nonpriority Creditor's Name   | -  |   |          |
|     | PO BOX 961212<br>FORT WORTH, TX 76161                               | When was the debt incurred?                                  | Opened 3/31/2018 Last Active 6/4/2018         |          |
|     | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |          |
|     | Debtor 1 only   | ☐ Contingent   |   |          |
|     | Debtor 2 only   | ☐ Unliquidated   |   |          |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |          |
|     | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
|     | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |          |
|     | debt  | ☐ Obligations arising out of a sepa                          | aration agreement or divorce that you did not |          |
|     | Is the claim subject to offset?                                     | report as priority claims                                    |   |          |
|     | No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |          |
|     | Yes   | Other. Specify Automobile                                    |   |          |

Debtor 1 Conchetta Larae Dansler

Document Page 27 of 56
Case number (if known)

| 4.5 | CNAC - IN101   | Last 4 digits of account number                            | 1846  | \$0.00     |  |
|-----|--|--|---|------------|--|
|     | Nonpriority Creditor's Name                            |  | Opened 6/8/2015 Last Active                                 |            |  |
|     | 12802 HAMILTON XING                                    | When was the debt incurred?                                | 5/16/2018   |            |  |
|     | BV CARMEL, IN 46032  Number Street City State Zip Code | As of the date you file, the claim                         | As of the date you file, the claim is: Check all that apply |            |  |
|     | Who incurred the debt? Check one.                      | • ,  |   |            |  |
|     | ■ Debtor 1 only  | ☐ Contingent   |   |            |  |
|     | Debtor 2 only  | ☐ Unliquidated   |   |            |  |
|     | Debtor 1 and Debtor 2 only                             | ☐ Disputed   |   |            |  |
|     | $\square$ At least one of the debtors and another      | Type of NONPRIORITY unsecure                               | d claim:  |            |  |
|     | ☐ Check if this claim is for a community               | Student loans  |   |            |  |
|     | debt Is the claim subject to offset?                   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not                |            |  |
|     | ■ No   | Debts to pension or profit-sharir                          | g plans, and other similar debts                            |            |  |
|     | Yes  | Other Specify Automobile                                   |   |            |  |
| 4.6 | COMENITY BANK/NWYRK&CO                                 | Last 4 digits of account number                            | 1846  | \$1,167.00 |  |
|     | Nonpriority Creditor's Name                            |  | Opened 10/16/2016 Last Active                               |            |  |
|     | PO BOX 182789  | When was the debt incurred?                                | 10/8/2019   |            |  |
|     | COLUMBUS, OH 43218  Number Street City State Zip Code  | As of the date you file, the claim                         | is: Chock all that apply                                    |            |  |
|     | Who incurred the debt? Check one.                      | As of the date you me, the dam                             | S. Officer all trial apply                                  |            |  |
|     | ■ Debtor 1 only  | ☐ Contingent   |   |            |  |
|     | Debtor 2 only  | ☐ Unliquidated   |   |            |  |
|     | ☐ Debtor 1 and Debtor 2 only                           | ☐ Disputed   |   |            |  |
|     | $\square$ At least one of the debtors and another      | Type of NONPRIORITY unsecure                               | d claim:  |            |  |
|     | Check if this claim is for a community                 | Student loans  |   |            |  |
|     | debt Is the claim subject to offset?                   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not                |            |  |
|     | ■ No   | Debts to pension or profit-sharir                          | g plans, and other similar debts                            |            |  |
|     | ☐ Yes  | ■ Other. Specify Charge Acc                                |   |            |  |
|     |  |  |   |            |  |
| 4.7 | COMENITY BANK/VCTRSSEC  Nonpriority Creditor's Name    | Last 4 digits of account number                            | 1846  | \$1,326.00 |  |
|     | PO BOX 182789<br>COLUMBUS, OH 43218                    | When was the debt incurred?                                | Opened 8/1/2017 Last Active 10/8/2019                       |            |  |
|     | Number Street City State Zip Code                      | As of the date you file, the claim                         | is: Check all that apply                                    |            |  |
|     | Who incurred the debt? Check one.                      |  | er chook an anat app.,                                      |            |  |
|     | ■ Debtor 1 only  | ☐ Contingent   |   |            |  |
|     | Debtor 2 only  | ☐ Unliquidated   |   |            |  |
|     | ☐ Debtor 1 and Debtor 2 only                           | ☐ Disputed   |   |            |  |
|     | ☐ At least one of the debtors and another              | Type of NONPRIORITY unsecure                               | d claim:  |            |  |
|     | ☐ Check if this claim is for a community               | ☐ Student loans  |   |            |  |
|     | debt Is the claim subject to offset?                   | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not               |            |  |
|     | ■ No   | Debts to pension or profit-sharing                         | g plans, and other similar debts                            |            |  |
|     | Yes  | Other. Specify Charge Acc                                  | ount  |            |  |

Debtor 1 Conchetta Larae Dansler

Document Page 28 of 56
Case number (if known)

| 4.8      | CREDIT ONE BANK   | Last 4 digits of account number                            | 1846  | \$0.00     |  |  |
|----------|---|--|---|------------|--|--|
|          | Nonpriority Creditor's Name                               |  | Opened 7/1/2016 Legt Active                                 |            |  |  |
|          | PO BOX 98872  | When was the debt incurred?                                | Opened 7/1/2016 Last Active 4/17/2018                       |            |  |  |
|          | LAS VEGAS, NV 89193                                       | _  | 4/1//2010   |            |  |  |
|          | Number Street City State Zip Code                         | As of the date you file, the claim                         | is: Check all that apply                                    |            |  |  |
|          | Who incurred the debt? Check one.                         |  |   |            |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |
|          | Debtor 1 and Debtor 2 only                                | ☐ Disputed   |   |            |  |  |
|          | ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecure                               | ed claim:   |            |  |  |
|          | ☐ Check if this claim is for a community                  | ☐ Student loans  |   |            |  |  |
|          | debt Is the claim subject to offset?                      | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not               |            |  |  |
|          | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts                           |            |  |  |
|          | ☐ Yes   | ■ Other. Specify Credit Card                               |   |            |  |  |
|          |   |  |   |            |  |  |
| 4.9      | EDFINANCIAL Nonpriority Creditor's Name                   | Last 4 digits of account number                            | 1846  | \$4,502.00 |  |  |
|          | 120 N ŚEVEN OAKS DR                                       | When was the debt incurred?                                | Opened 8/29/2016  |            |  |  |
|          | KNOXVILLE, TN 37922  Number Street City State Zip Code    | As of the date you file, the claim                         | As of the date you file, the claim is: Check all that apply |            |  |  |
|          | Who incurred the debt? Check one.                         | ,,   |   |            |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |
|          | Debtor 1 and Debtor 2 only                                | ☐ Disputed   |   |            |  |  |
|          | ·   | Type of NONPRIORITY unsecure                               | ed claim:   |            |  |  |
|          | ☐ At least one of the debtors and another                 | Student loans  |   |            |  |  |
|          | ☐ Check if this claim is for a community debt             | _  | aretion agreement or diverse that you did not               |            |  |  |
|          | Is the claim subject to offset?                           | report as priority claims                                  | aration agreement or divorce that you did not               |            |  |  |
|          | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts                           |            |  |  |
|          | ☐ Yes   | Other. Specify   |   |            |  |  |
|          | Li Tes  | Student  |   |            |  |  |
|          |   | Student  |   |            |  |  |
| 4.1<br>0 | ERC   | Last 4 digits of account number                            | 1846  | \$77.00    |  |  |
|          | Nonpriority Creditor's Name PO BOX 57547                  | When was the debt incurred?                                | Opened 11/4/2019  |            |  |  |
|          | JACKSONVILLE, FL 32241  Number Street City State Zip Code | As of the date you file, the claim                         | is: Chack all that apply                                    |            |  |  |
|          | Who incurred the debt? Check one.                         | As of the date you me, the claim                           | 13. Check all that apply                                    |            |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |
|          | Debtor 1 and Debtor 2 only                                | ☐ Disputed   |   |            |  |  |
|          | ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecure                               | ed claim:   |            |  |  |
|          | ☐ Check if this claim is for a community                  | ☐ Student loans  |   |            |  |  |
|          | debt  | ☐ Obligations arising out of a sepa                        |   |            |  |  |
|          | Is the claim subject to offset?                           | report as priority claims                                  |   |            |  |  |
|          | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts                           |            |  |  |
|          | Yes   | ■ Other. Specify Collection                                |   |            |  |  |
|          |   |  |   |            |  |  |

Debtor 1 Conchetta Larae Dansler Page 29 of 56 Case number (if known)

| 4.1 | FIRST SOUTHWESTERN FINAN Nonpriority Creditor's Name                | Last 4 digits of account number                                     | 1846   | \$1,199.00 |
|-----|---|---|--|------------|
|     | 1845 W 4400 S<br>ROY, UT 84067                                      | When was the debt incurred?   | Opened 10/12/2013 Last Active 3/2/2015       |            |
|     | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i                                | s: Check all that apply                      |            |
|     | Debtor 1 only   | ☐ Contingent  |  |            |
|     | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|     | $\square$ At least one of the debtors and another                   | Type of NONPRIORITY unsecured                                       | d claim:                                     |            |
|     | $\square$ Check if this claim is for a community                    | Student loans   |  |            |
|     | debt Is the claim subject to offset?                                | Obligations arising out of a sepa report as priority claims         | ration agreement or divorce that you did not |            |
|     | ■ No  | Debts to pension or profit-sharin                                   | g plans, and other similar debts             |            |
|     | ☐ Yes   | Other Specify Automobile  |  |            |
| 4.1 | MACYS DEPARTMENT STORES   | Last 4 digits of account number                                     | 1846   | \$2,464.00 |
|     | Nonpriority Creditor's Name PO BOX 8218 MASON, OH 45040             | When was the debt incurred?   | Opened 1/21/2017 Last Active 10/8/2019       |            |
|     | Number Street City State Zip Code                                   | As of the date you file, the claim i                                |  |            |
|     | Who incurred the debt? Check one.                                   |   |  |            |
|     | Debtor 1 only   | ☐ Contingent  |  |            |
|     | Debtor 2 only   | ☐ Unliquidated  |  |            |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|     | $\square$ At least one of the debtors and another                   | Type of NONPRIORITY unsecured                                       | d claim:                                     |            |
|     | ☐ Check if this claim is for a community debt                       |   | ration agreement or divorce that you did not |            |
|     | Is the claim subject to offset? ■                                   | report as priority claims  Debts to pension or profit-sharin        | a plane, and other similar debte             |            |
|     | ■ No<br>□ Yes   |   |  |            |
|     | ☐ Yes   | Other. Specify Charge Acc   | Ourit  |            |
| 4.1 | NATIONWD REC  | Last 4 digits of account number                                     | 1846   | \$182.00   |
|     | Nonpriority Creditor's Name<br>PO BOX 8005<br>CLEVELAND, TN 37320   | When was the debt incurred?   | Opened 7/25/2016                             |            |
|     | Number Street City State Zip Code                                   | As of the date you file, the claim i                                | s: Check all that apply                      |            |
|     | Who incurred the debt? Check one.                                   |   |  |            |
|     | Debtor 1 only   | ☐ Contingent  |  |            |
|     | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|     | At least one of the debtors and another                             | Type of NONPRIORITY unsecured                                       |  |            |
|     | ☐ Check if this claim is for a community debt                       | Student loans   |  |            |
|     | Is the claim subject to offset?                                     | Obligations arising out of a sepa<br>report as priority claims      | ration agreement or divorce that you did not |            |
|     | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts |  |            |
|     | Yes   | ■ Other. Specify Collection   |  |            |
|     |   |   |  |            |

Debtor 1 Conchetta Larae Dansler

Document Page 30 of 56
Case number (if known)

| 4.1   | ONEMAIN   | Last 4 digits of account number                              | 1846  | \$3,643.00      |
|-------|---|--|---|-----------------|
| I     | Nonpriority Creditor's Name<br>PO BOX 1010              | When was the debt incurred?                                  | Opened 10/29/2019                             |                 |
|       | EVANSVILLE, IN 47706  Number Street City State Zip Code | As of the date you file, the claim i                         | is: Check all that apply                      |                 |
|       | Who incurred the debt? Check one.                       | As of the date you me, the claim                             | s. Oneon an mat apply                         |                 |
| I     | Debtor 1 only   | ☐ Contingent   |   |                 |
|       | Debtor 2 only   | ☐ Unliquidated   |   |                 |
| ı     | ☐ Debtor 1 and Debtor 2 only                            | □ Disputed   |   |                 |
| ı     | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecured                                | d claim:                                      |                 |
| ı     | ☐ Check if this claim is for a community                | ☐ Student loans  |   |                 |
|       | debt  |  | ration agreement or divorce that you did not  |                 |
|       | Is the claim subject to offset?                         | report as priority claims  Debts to pension or profit-sharin | a plane, and other similar debte              |                 |
|       | ■ No  | ·  |   |                 |
|       | Yes   | Other. Specify Unsecured                                     | Loan  |                 |
| )   ' | REPUBLIC FINANCE INC                                    | Last 4 digits of account number                              | 1846  | \$5,382.00      |
|       | Nonpriority Creditor's Name<br>471 E Main St            | When was the debt incurred?                                  | Opened 10/21/2019                             |                 |
|       | Cartersville, GA 30121                                  |  | <u> </u>                                      |                 |
|       | Number Street City State Zip Code                       | As of the date you file, the claim i                         | is: Check all that apply                      |                 |
| _     | Who incurred the debt? Check one.                       |  |   |                 |
|       | Debtor 1 only   | ☐ Contingent   |   |                 |
|       | Debtor 2 only   | ☐ Unliquidated   |   |                 |
|       | Debtor 1 and Debtor 2 only                              | Disputed   |   |                 |
| _     | At least one of the debtors and another                 | Type of NONPRIORITY unsecured                                | d claim:                                      |                 |
|       | ☐ Check if this claim is for a community debt           | ☐ Student loans  |   |                 |
|       | ls the claim subject to offset?                         | report as priority claims                                    | ration agreement or divorce that you did not  |                 |
|       | ■ No  | Debts to pension or profit-sharin                            | g plans, and other similar debts              |                 |
| I     | ☐ Yes   | Other. Specify Note Loan                                     |   |                 |
| 1.1   | OVALOD/DELIK  |  | 4040  | Ф40 <b>5</b> 00 |
| , _   | SYNCB/BELK Nonpriority Creditor's Name                  | Last 4 digits of account number                              | 1846  | \$495.00        |
|       | . ,   |  | Opened 7/15/2016 Last Active                  |                 |
|       | PO BOX 965028<br>ORLANDO, FL 32896                      | When was the debt incurred?                                  | 10/13/2019                                    |                 |
|       | Number Street City State Zip Code                       | As of the date you file, the claim i                         | is: Check all that apply                      |                 |
|       | Who incurred the debt? Check one.                       | ,  |   |                 |
| I     | Debtor 1 only   | ☐ Contingent   |   |                 |
| ı     | Debtor 2 only   | ☐ Unliquidated   |   |                 |
| ı     | ☐ Debtor 1 and Debtor 2 only                            | Disputed   |   |                 |
| ı     | At least one of the debtors and another                 | Type of NONPRIORITY unsecured                                | d claim:                                      |                 |
| l     | ☐ Check if this claim is for a community                | ☐ Student loans  |   |                 |
| (     | debt<br>Is the claim subject to offset?                 | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |                 |
| I     | No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |                 |
| ı     | ☐ Yes   | ■ Other. Specify Charge Acc                                  | ount  |                 |

Debtor 1 Conchetta Larae Dansler

Document Page 31 of 56
Case number (if known)

| 4.1<br>7 | SYNCB/JC PENNEY   | Last 4 digits of account number                                 | 1846   | \$0.00   |
|----------|---|---|--|----------|
|          | Nonpriority Creditor's Name PO BOX 965007 ORLANDO, FL 32896 Number Street City State Zip Code | When was the debt incurred?  As of the date you file, the claim | Opened 6/1/2017 Last Active 7/19/2017 is: Check all that apply |          |
|          | Who incurred the debt? Check one.  ■ Debtor 1 only  | П 0   |  |          |
|          |   | ☐ Contingent  |  |          |
|          | Debtor 2 only   | ☐ Unliquidated  |  |          |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecure                        | d alaim.   |          |
|          | At least one of the debtors and another   | Student loans   | u Ciaiii.  |          |
|          | ☐ Check if this claim is for a community debt  Is the claim subject to offset?                |   | aration agreement or divorce that you did not                  |          |
|          | •   | Debts to pension or profit-sharing                              | a plane, and other similar debte                               |          |
|          | ■ No  |   |  |          |
|          | ☐ Yes   | Other. Specify Charge Acc                                       | ount   |          |
| 4.1<br>8 | TD BANK USA/TARGET CREDI  | Last 4 digits of account number                                 | 1846   | \$329.00 |
|          | Nonpriority Creditor's Name PO BOX 673 MINNEAPOLIS, MN 55440                                  | When was the debt incurred?                                     | Opened 10/22/2019  |          |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                          | As of the date you file, the claim                              | is: Check all that apply                                       |          |
|          | Debtor 1 only   | ☐ Contingent  |  |          |
|          | Debtor 2 only   | ☐ Unliquidated  |  |          |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |          |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                   | d claim:   |          |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |  |          |
|          | debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims      | aration agreement or divorce that you did not                  |          |
|          | ■ No  | Debts to pension or profit-sharing                              | g plans, and other similar debts                               |          |
|          | Yes   | ■ Other. Specify Credit Card                                    |  |          |
| 4.1      | WELLS FARGO CARD SERVICE  | Last 4 digits of account number                                 | 1846   | \$0.00   |
|          | Nonpriority Creditor's Name PO BOX 14517 DES MOINES, IA 50306                                 | When was the debt incurred?                                     | Opened 3/27/2016 Last Active 2/19/2018                         |          |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                          | As of the date you file, the claim                              | is: Check all that apply                                       |          |
|          | ■ Debtor 1 only   | ☐ Contingent  |  |          |
|          | Debtor 2 only   | ☐ Unliquidated  |  |          |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |          |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                                    | d claim:   |          |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |  |          |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims    | aration agreement or divorce that you did not                  |          |
|          | ■ No  | Debts to pension or profit-sharing                              | g plans, and other similar debts                               |          |
|          | Yes   | ■ Other. Specify Secured Credit Card                            |  |          |

Page 32 of 56 Case number (if known) Document Debtor 1 Conchetta Larae Dansler

| 4.2<br>0 | Wellstar Hospital   | Last 4 digits of account number   | \$4,336.00 |
|----------|---|---|------------|
|          | Nonpriority Creditor's Name P.O. Box 742625 Atlanta, GA 30374 Number Street City State Zip Code | When was the debt incurred?  As of the date you file, the claim is: Check all that apply                          |            |
|          | Who incurred the debt? Check one.   | _   |            |
|          | Debtor 1 only   | ☐ Contingent  |            |
|          | Debtor 2 only   | ☐ Unliquidated  |            |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|          | debt Is the claim subject to offset?  | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|          | ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                                    |            |
|          | Yes   | ■ Other. Specify _medical   |            |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

|     |   |  |   | i otai Ciaim  |
|-----|---|--|---|---|
| 6a. | Domestic support obligations  | 6a.  | \$  | 0.00  |
|     |   |  |   |   |
| 6b. | Taxes and certain other debts you owe the government  | 6b.  | \$  | 8,000.00  |
| 6c. | Claims for death or personal injury while you were intoxicated  | 6c.  | \$  | 0.00  |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.  | \$  | 0.00  |
| 6e. | Total Priority. Add lines 6a through 6d.  | 6e.  | \$  | 8,000.00  |
|     |   |  |   | Total Claim   |
| 6f. | Student loans   | 6f.  | \$  | 4,502.00  |
| 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.  | \$  | 0.00  |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.  | \$  | 0.00  |
| 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i.  | \$  | 21,914.00   |
| 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j.  | \$  | 26,416.00   |
|     | 6b.<br>6c.<br>6d.<br>6e.<br>6f.<br>6g.<br>6h.   | <ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul> | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6e. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$ 6c. \$ 6d. \$ |

| Fill in this infor     | mation to identify your  |                   |            |                                      |
|------------------------|--------------------------|-------------------|------------|--------------------------------------|
| Debtor 1               | Conchetta Larae D        | Dansler           |            |                                      |
|                        | First Name               | Middle Name       | Last Name  |                                      |
| Debtor 2               |                          |                   |            |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name  |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA |                                      |
| Case number (if known) |                          |                   |            | ☐ Check if this is an amended filing |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| P   | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | Grandview Apartments<br>1350 Joe Frank Harris Pkwy SE<br>#110<br>Cartersville, GA 30120                  | residential lease                       |
| 2.2 | Progressive Leasing<br>10619 S. Jordan Gateway<br>South Jordan, UT 84095                                 | lease to own                            |
| 2.3 | Snap! Finance to be provided   |   |

|                           |  | Docume                        | ent Page 34 d           | of 56   |  |
|---------------------------|--|-------------------------------|-------------------------|---|--|
| Fill in this              | information to identify your   | case:                         |                         |   |  |
| Dobtor 1                  | Canabatta Larga F  | No mala n                     |                         |   |  |
| Debtor 1                  | Conchetta Larae D  | Middle Name                   | Last Name               |   |  |
| Debtor 2                  |  |                               |                         |   |  |
| (Spouse if, filir         | ng) First Name   | Middle Name                   | Last Name               |   |  |
| United Sta                | tes Bankruptcy Court for the:  | NORTHERN DISTRICT             | OF GEORGIA              |   |  |
| OOu O.                    | too Dannapto, Countro, anor  |                               |                         |   |  |
| Case numb                 | ber  |                               |                         |   |  |
| (if known)                |  |                               |                         |   | Check if this is an  |
|                           |  |                               |                         |   | amended filing   |
| Official                  | l Form 106H  |                               |                         |   |  |
|                           |  | -14                           |                         |   |  |
| Sched                     | lule H: Your Cod   | ebtors                        |                         |   | 12/15  |
|                           | and case number (if known) you have any codebtors? (If                   |                               |                         | as a codebtor.                                      |  |
| ☐ Yes                     | <b>3</b>   |                               |                         |   |  |
|                           | hin the last 8 years, have you<br>a, California, Idaho, Louisiana        |                               |                         |   | states and territories include   |
|                           | Go to line 3.  Did your spouse, former sports                            | use, or legal equivalent live | e with you at the time? |   |  |
| in line<br>Form<br>out Co | 2 again as a codebtor only i<br>106D), Schedule E/F (Officia<br>olumn 2. | f that person is a guaran     | tor or cosigner. Make   | sure you have listed the<br>06G). Use Schedule D, S | with you. List the person shown<br>e creditor on Schedule D (Official<br>schedule E/F, or Schedule G to fill |
|                           | Column 1: Your codebtor Name, Number, Street, City, State and Z          | IP Code                       |                         | Check all schedules                                 | ditor to whom you owe the debt sthat apply:  |
| 0.4                       |  |                               |                         | По в г  |  |
| 3.1                       | Name   |                               |                         | Schedule D, line                                    |  |
|                           | Hamo   |                               |                         | ☐ Schedule E/F, lir                                 |  |
|                           |  |                               |                         | ☐ Schedule G, line                                  |  |
|                           | Number Street<br>City  | State                         | ZIP Code                | _   |  |
| 2.0                       |  |                               |                         | Cabadula D lina                                     |  |
| 3.2                       | Name   |                               |                         | Schedule D, line                                    | <del></del>  |
|                           |  |                               |                         | ☐ Schedule E/F, lin                                 |  |
|                           |  |                               |                         | ☐ Schedule G, line                                  |  |
|                           | Number Street  | _                             |                         | _   |  |
|                           | City   | State                         | ZIP Code                |   |  |

# Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 35 of 56

| Fill               | in this information to identify your ca  | ase:  |  |  |                           |                                |                                   |   |   |
|--------------------|--|---|--|--|---------------------------|--------------------------------|-----------------------------------|---|---|
| Del                | otor 1 Conchetta La  | arae Dansler  |  |  |                           |                                |                                   |   |   |
|                    | otor 2   |   |  |  |                           |                                |                                   |   |   |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC                                  | T OF GEORGIA                                   |  |                           |                                |                                   |   |   |
|                    | se number  |   |  | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: |                           |                                |                                   |   |   |
| 0                  | fficial Form 106l  |   |  |  |                           |                                | D/ YYYY                           | 3                                       |   |
| S                  | chedule I: Your Inc  | ome   |  |  |                           | WIWI / D                       | <i>D</i> / 1111                   | 12/1                                    | Ę |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filir r spouse is not filing wi | ng jointly, and your s<br>th you, do not inclu | spouse<br>de infor   | is liv<br>matio           | ing with you,<br>on about your | include infor<br>spouse. If m     | mation about your nore space is needed, | n |
| 1.                 | Fill in your employment information.   | Debtor 1  |  |  | Deb                       | Debtor 2 or non-filling spouse |                                   |   |   |
|                    | If you have more than one job, attach a separate page with information about additional  | Employment status  Employed  Not employed           |  |  | ☐ Employed ☐ Not employed |                                |                                   |   |   |
|                    | employers.   | Occupation  | technician                                     |  |                           |                                |                                   |   |   |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name                                     | Nots Logistics                                 |  |                           |                                |                                   |   |   |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address                                  | 17848 Mokingbir<br>Nashville, IL 622           |  |                           |                                |                                   |   |   |
|                    |  | How long employed the                               | nere? <u>4.5 year</u>                          | 'S   |                           |                                |                                   |   |   |
| Par                | Give Details About Mor   | nthly Income  |  |  |                           |                                |                                   |   |   |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If y                        | you have nothing to re                         | eport for  | any I                     | ine, write \$0 ir              | the space. Ir                     | nclude your non-filing                  |   |
|                    | u or your non-filing spouse have mo  |   | embine the information                         | n for all e  | emplo                     | oyers for that p               | erson on the                      | lines below. If you need                | j |
|                    |  |   | F  |  | For Debtor 1              |                                | For Debtor 2 or non-filing spouse |   |   |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |   |  | 2.   | \$                        | 3,283.                         | 00 \$                             | N/A                                     |   |
| 3.                 | Estimate and list monthly overt  | ime pay.  |  | 3.   | +\$                       | 0.                             | 00_ +\$                           | N/A                                     |   |

Official Form 106I Schedule I: Your Income page 1

3,283.00

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 36 of 56

| Debto | or 1 Conchetta Larae Dansler   |          | Case r    | number (if known) |        |                            |          |  |
|-------|--|----------|-----------|-------------------|--------|----------------------------|----------|--|
|       |  |          |           | Debtor 1          | non-fi | ebtor 2 or<br>iling spouse |          |  |
|       | Copy line 4 here   | 4.       | \$        | 3,283.00          | \$     | N/A                        |          |  |
| 5.    | List all payroll deductions:   |          |           |                   |        |                            |          |  |
|       | 5a. Tax, Medicare, and Social Security deductions  | 5a.      | \$        | 383.00            | \$     | N/A                        |          |  |
|       | 5b. Mandatory contributions for retirement plans   | 5b.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 5c. Voluntary contributions for retirement plans   | 5c.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 5d. Required repayments of retirement fund loans   | 5d.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 5e. Insurance  | 5e.      | \$        | 218.00            | \$     | N/A                        |          |  |
|       | 5f. Domestic support obligations   | 5f.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 5g. Union dues   | 5g.      | \$_<br>\$ | 0.00              | —      | N/A                        |          |  |
|       | 5h. Other deductions. Specify: 401k loan   | 5h.+     |           |                   | + \$   | N/A                        |          |  |
|       | <b>Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       | \$        | 690.00            | \$     | N/A                        |          |  |
| 7.    | Calculate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       | \$        | 2,593.00          | \$     | N/A                        |          |  |
|       | List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |          |           |                   |        |                            |          |  |
|       | monthly net income.  | 8a.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8b. Interest and dividends   | 8b.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8c. Family support payments that you, a non-filing spouse, or a deported regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |          | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8d. Unemployment compensation  | 8d.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8e. Social Security  | 8e.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemer Nutrition Assistance Program) or housing subsidies.  Specify:   | ntal 8f. | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8g. Pension or retirement income   | 8g.      | \$        | 0.00              | \$     | N/A                        |          |  |
|       | 8h. Other monthly income. Specify:   | 8h.+     | \$        | 0.00              | + \$   | N/A                        |          |  |
| 9.    | Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.       | \$        | 0.00              | \$     | N/A                        |          |  |
| 10.   | Calculate monthly income. Add line 7 + line 9.   | 10. \$   |           | 2,593.00 + \$     |        | N/A = \$ 2                 | 2,593.00 |  |
|       | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |          |           | -,000.00          |        | 14/1                       | _,000.00 |  |
| 11.   | 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.6 |          |           |                   |        |                            |          |  |
|       | Add the amount in the last column of line 10 to the amount in line 11. Write that amount on the Summary of Schedules and Statistical Summary of applies  |          |           |                   |        | 12. \$2                    | 2,593.00 |  |
| 13.   | Do you expect an increase or decrease within the year after you file the   | is form? |           |                   |        | monthly i                  |          |  |

Official Form 106l Schedule I: Your Income page 2

| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1  | ·           |                               |                     |                 |                            |  | 1                           |   |   |
|--|-------------|-------------------------------|---------------------|-----------------|----------------------------|--|-----------------------------|---|---|
| Deterior 2   Spouse, if filling)   An amended filling  | FIII I      | n this informa                | tion to identify yo | our case:       |                            |  |                             |   |   |
| A supplement showing pospetition chapter   3 separates     | Debt        | tor 1                         | Conchetta La        | rae Dans        | ler                        |  |                             |   |   |
| United States Bankruptey Count for the: NORTHERN DISTRICT OF GEORGIA    MM / DD / YYYY   | Debt        | tor 2                         |                     |                 |                            |  | _                           | J   | wing postpetition chapter                             |
| Case number (It known)    Comparison   Compa | (Spo        | ouse, if filing)              |                     |                 |                            |  | _                           | 13 expenses as of                         | the following date:                                   |
| Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Debtor 2 live in a separate household?  No.  Do not list Debtor 1 and Yes. Fill out this information for behave?  Do you have dependents?  No.  Do not list Debtor 1 and Yes. Fill out this information for behave?  Do not state the dependents names.  No.  Yes.  Do your expenses include expenses of people other than yourself and your dependents?  No.  No.  No.  No.  No.  Yes.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. S. 0.00  4c. Home maintenance, repair, and upkeep expenses  Editing worker and your dependency or renter's insurance  4d. S. 0.00  Ac. Home maintenance, repair, and upkeep expenses  4d. S. 0.00  Ac. Home maintenance, repair, and upkeep expenses  4d. S. 0.00  Ac. Home maintenance, repair, and upkeep expenses  | Unite       | ed States Bankr               | uptcy Court for the | : NORTH         | ERN DISTRICT OF GEOR       | RGIA   |                             | MM / DD / YYYY                            |   |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Describe Your Household  |             |                               |                     |                 |                            |  |                             |   |   |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Rart 1  | Of          | ficial Fo                     | rm 106J             |                 |                            |  | •                           |   |   |
| information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   | Sc          | hedule                        | J: Your             | Exper           | ises                       |  |                             |   | 12/1  |
| Is this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.   | info        | rmation. If m                 | ore space is ne     | eded, atta      | ch another sheet to this   |  |                             |   |   |
| No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  No  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  No  Yes  No  Yes  Stiff Out this information for Each dependent  |             |                               |                     | hold            |                            |  |                             |   |   |
| So you have dependents? No    No   | 1.          | _                             |                     |                 |                            |  |                             |   |   |
| No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?   No   No   No   No   No   No   No   N   |             |                               |                     | in a senar      | ate household?             |  |                             |   |   |
| Ves. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.    Do you have dependents?   No   No   Debtor 1 and Debtor 1 and Debtor 2.   Dependent   Pyes.   Fill out this information for Debtor 2   Dependent's relationship to Debtor 1 age   Does dependent   Ilive with you?   |             |                               |                     | iii a sopai     | ate nousenoid.             |  |                             |   |   |
| Do not list Debtor 1 and   |             | = ::                          | ~                   | st file Offici  | al Form 106J-2, Expenses   | for Separate House   | ehold of Deb                | otor 2.                                   |   |
| Do not list Debtor 1 and   | 2.          | Do you have                   | e dependents?       | ■ No            |                            |  |                             |   |   |
| dependents names.    Yes   No   No   Yes   Yes   Yes   No   Yes   Y |             | Do not list Do                | •                   | _               |                            |  |                             | •   |   |
| 3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:   |             | Do not state                  | the                 |                 |                            |  |                             |   | □ No  |
| 3. Do your expenses include expenses of people other than yourself and your dependents?    Ano   Yes   No   Yes  |             | dependents                    | names.              |                 |                            |  |                             |   |   |
| 3. Do your expenses include expenses of people other than yourself and your dependents?    Stimate Your Ongoing Monthly Expenses   |             |                               |                     |                 |                            |  |                             |   | = ::-   |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. \$  0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues   |             |                               |                     |                 |                            |  |                             |   |   |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. \$ 0.00  4c. Home maintenance, repair, and upkeep expenses  4c. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00  4d. Homeowner's association or condominium dues  |             |                               |                     |                 |                            |  |                             |   | ☐ Yes   |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  |             |                               |                     |                 |                            |  |                             |   | — · · · ·   |
| expenses of people other than yourself and your dependents?    Part 2:   | 3           | Do your eyr                   | oneae includa       | _               |                            |  |                             |   | ☐ Yes   |
| Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. In rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  | ٥.          | expenses of                   | f people other t    | han $_{m \Box}$ |                            |  |                             |   |   |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues   |             | yourself and                  | d your depende      | nts? ⊔          | 165                        |  |                             |   |   |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  Your expenses  4. \$ 845.00   | Esti<br>exp | mate your ex<br>enses as of a | penses as of yo     | our bankr       | uptcy filing date unless y | ou are using this for the second seco | orm as a si<br>e J, check t | upplement in a Cha<br>he box at the top o | apter 13 case to report<br>f the form and fill in the |
| payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. \$  0.00  4d. Homeowner's association or condominium dues   | the         | value of sucl                 | n assistance an     |                 |                            |  |                             | Your exp                                  | enses   |
| payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. \$  0.00  4d. Homeowner's association or condominium dues   |             |                               |                     |                 |                            |  |                             |   |   |
| 4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$0.004c.Home maintenance, repair, and upkeep expenses4c.\$0.004d.Homeowner's association or condominium dues4d.\$0.00  | 4.          |                               |                     |                 |                            | nclude first mortgag   | e<br>4.                     | \$  | 845.00  |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00   |             | If not includ                 | led in line 4:      |                 |                            |  |                             |   |   |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00   |             | 4a. Real e                    | estate taxes        |                 |                            |  | 4a.                         | \$  | 0.00  |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00  |             |                               | •                   |                 |                            |  | 4b.                         | \$  | 0.00  |
| , <u> </u>   |             |                               |                     |                 |                            |  |                             | :   |   |
| o. Administrati mortigage payments for your restriction such as notice equity to all 5. 3. 3. (1.11)   | 5.          |                               |                     |                 |                            | me equity loans  | 4d.<br>5.                   |   | 0.00  |

## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 38 of 56

| Debtor 1 Con                | chetta Larae Dansler  | Case num       | ber (if known)   |                             |
|-----------------------------|---|----------------|------------------|-----------------------------|
| . Utilities:                |   |                |                  |                             |
| 6a. Elec                    | tricity, heat, natural gas  | 6a.            | \$               | 200.00                      |
| 6b. Wate                    | er, sewer, garbage collection   | 6b.            | \$               | 50.00                       |
| 6c. Tele                    | phone, cell phone, Internet, satellite, and cable services  | 6c.            | \$               | 140.00                      |
| 6d. Othe                    | er. Specify:  | 6d.            | \$               | 0.00                        |
|                             | housekeeping supplies   |                |                  | 270.00                      |
|                             | and children's education costs  | 8.             | \$               | 0.00                        |
|                             | aundry, and dry cleaning  | 9.             | ·                | 100.00                      |
|                             | care products and services  | 10.            | · -              | 100.00                      |
|                             | nd dental expenses  | 11.            | ·                | 0.00                        |
|                             | ation. Include gas, maintenance, bus or train fare.   | 11.            | Ψ                | 0.00                        |
|                             | ude car payments.   | 12.            | \$               | 218.00                      |
|                             | nent, clubs, recreation, newspapers, magazines, and books   | 13.            | \$               | 0.00                        |
|                             | contributions and religious donations   | 14.            | · ———            | 0.00                        |
| . Insurance                 | <u> </u>  |                | Ψ                | 0.00                        |
|                             | ude insurance deducted from your pay or included in lines 4 or 20.  |                |                  |                             |
| 15a. Life                   |   | 15a.           | \$               | 0.00                        |
|                             | th insurance  | 15b.           |                  | 0.00                        |
|                             | cle insurance   | 15c.           |                  | 0.00                        |
|                             | er insurance. Specify:  | 15d.           |                  | 0.00                        |
|                             | not include taxes deducted from your pay or included in lines 4 or 20.  | 13u.           | Ψ                | 0.00                        |
| Specify:                    | Thor include taxes deducted from your pay or included in lines 4 or 20.   | 16.            | \$               | 0.00                        |
|                             | t or lease payments:  |                | Ψ                | 0.00                        |
|                             | payments for Vehicle 1  | 17a.           | \$               | 0.00                        |
|                             | payments for Vehicle 2  | 17a.           | · -              |                             |
|                             |   |                | ·                | 0.00                        |
| 176. Othe                   | er. Specify: progressive lease  | 17c.           | ·                | 270.00                      |
|                             | er. Specify: snap lease   | 17d.           | ·                | 240.00                      |
|                             | her and dryer   |                | \$               | 160.00                      |
|                             | nents of alimony, maintenance, and support that you did not report as   |                | \$               | 0.00                        |
|                             | from your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 10.            |                  |                             |
|                             | ments you make to support others who do not live with you.  |                | \$               | 0.00                        |
| Specify:                    |   | 19.            |                  |                             |
|                             | property expenses not included in lines 4 or 5 of this form or on Scho  |                |                  | 0.00                        |
|                             | gages on other property   | 20a.           |                  | 0.00                        |
|                             | estate taxes  | 20b.           | ·                | 0.00                        |
|                             | erty, homeowner's, or renter's insurance  | 20c.           |                  | 0.00                        |
|                             | tenance, repair, and upkeep expenses  | 20d.           | ·                | 0.00                        |
| 20e. Hom                    | eowner's association or condominium dues  | 20e.           | \$               | 0.00                        |
| Other: Spe                  | ecify:  | 21.            | +\$              | 0.00                        |
| 0-11-1-                     |   |                |                  |                             |
|                             | your monthly expenses   |                | φ.               | 0.500.00                    |
|                             | nes 4 through 21.   |                | Ψ                | 2,593.00                    |
|                             | line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |                | \$               |                             |
| 22c. Add lii                | ne 22a and 22b. The result is your monthly expenses.  |                | \$               | 2,593.00                    |
| Calculate                   | your monthly not income   |                |                  |                             |
|                             | your monthly net income.  | 23a.           | ¢                | 2 502 00                    |
|                             | y line 12 (your combined monthly income) from Schedule I.   |                |                  | 2,593.00                    |
| 230. Cop                    | y your monthly expenses from line 22c above.  | 23b.           | -Ф               | 2,593.00                    |
| 000 004                     | west your monthly synapses from your manth by the same  |                |                  |                             |
|                             | ract your monthly expenses from your monthly income.  | 23c.           | \$               | 0.00                        |
| ine                         | result is your monthly net income.  | 200.           | <u> </u>         | 0.00                        |
| For example<br>modification | pect an increase or decrease in your expenses within the year after you, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage? |                |                  | se or decrease because of a |
| ■ No.                       |   |                |                  |                             |
| ☐ Yes.                      | Explain here: Debtor anticipates getting a new car and schedu   | ما المما المما | at the entisinat | and accompany               |

## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 39 of 56

| Fill in this infor              | mation to identify your    | case:                 |   |  |
|---------------------------------|----------------------------|-----------------------|---|--|
| Debtor 1                        | Conchetta Larae D          | Dansler               |   |  |
| Dahtara                         | First Name                 | Middle Name           | Last Name   |  |
| Debtor 2<br>(Spouse if, filing) | First Name                 | Middle Name           | Last Name   |  |
| United States Ba                | ankruptcy Court for the:   | NORTHERN DIST         | TRICT OF GEORGIA  |  |
| Case number                     |                            |                       |   |  |
| (if known)                      |                            |                       |   | ☐ Check if this is an                                    |
|                                 |                            |                       |   | amended filing   |
|                                 |                            |                       |   |  |
| Official Fo                     | orm 108                    |                       |   |  |
| Stateme                         | nt of Intentio             | n for Indiv           | riduals Filing Under Chapt  | er 7   |
|                                 |                            |                       |   |  |
|                                 | lividual filing under cha  | • • •                 | l out this form if:   |  |
| _                               | ve claims secured by yo    |                       |   |  |
|                                 | sed personal property a    |                       | ot expired. you file your bankruptcy petition or by the date s  | at for the masting of araditors                          |
|                                 | ever is earlier, unless th |                       | e time for cause. You must also send copies to the  |  |
|                                 | eople are filing togethe   | r in a joint case, bo | th are equally responsible for supplying correct i  | nformation. Both debtors must                            |
| •                               |                            | ale. If more space is | s needed, attach a separate sheet to this form. On  | the top of any additional pages                          |
|                                 | our name and case nur      |                       | s needed, attach a separate sheet to this form. On  | i tile top of any additional pages,                      |
| Part 1: List Y                  | our Creditors Who Have     | e Secured Claims      |   |  |
| -                               |                            |                       | Creditors Who Have Claims Secured by Branart  | ov (Official Form 106D) fill in the                      |
| information b                   |                            | art 1 or Schedule D   | : Creditors Who Have Claims Secured by Propert  | y (Official Form 106D), fill in the                      |
| Identify the cr                 | reditor and the property t | hat is collateral     | What do you intend to do with the property that secures a debt?                                       | t Did you claim the property<br>as exempt on Schedule C? |
|                                 |                            |                       | Scoules a dest.   | as exempt on concaute o.                                 |
| Creditor's (                    | COOSA VALLEY CRE           | DIT UNIO              | Companded the property  | □No  |
| name:                           | JOOGA VALLET ONE           | DIT ONIO              | <ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>                  | □ No   |
|                                 |                            |                       | ☐ Retain the property and enter into a  | Yes  |
| Description of                  |                            | de 33000 miles        | Reaffirmation Agreement.  |  |
| property<br>securing debt       | Vehicle                    |                       | ☐ Retain the property and [explain]:  |  |
| securing debt                   |                            |                       |   | _  |
| One altre                       | DECIONAL EINANGE           | OOMBANN(              |   | П.,  |
| Creditor's F name:              | REGIONAL FINANCE           | COMPANY               | ☐ Surrender the property.   | □ No   |
| name.                           |                            |                       | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul> | ■ Yes  |
| Description of                  | f Secured Loan             |                       | Reaffirmation Agreement.  | <del>-</del> 103   |
| property                        |                            |                       | Retain the property and [explain]:  |  |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

avoid lien using 11 U.S.C. § 522(f)

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

# Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 40 of 56

| Debtor 1 Conchetta Larae Dansler Case            |                       |         |   |                                   | Case number (if known) |                              |
|--|-----------------------|---------|---|-----------------------------------|------------------------|------------------------------|
| Les  | sor's name            | e:      | Grandview Apartments  |                                   |                        | □ No                         |
|  |                       |         |   |                                   |                        | ■ Yes                        |
|  | cription of<br>perty: | fleased | residential lease   |                                   |                        |                              |
| Les  | sor's name            | e:      | Progressive Leasing   |                                   |                        | □ No                         |
|  |                       |         |   |                                   |                        | ■ Yes                        |
|  | cription of<br>perty: | fleased | lease to own  |                                   |                        |                              |
| Par  | i 3: Sig              | n Below |   |                                   |                        |                              |
|  |                       |         | y, I declare that I have indicate<br>to an unexpired lease. | d my intention about any property | of my estate that sec  | ures a debt and any personal |
| X  |                       |         | rae Dansler   | X                                 |                        |                              |
| Conchetta Larae Dansler<br>Signature of Debtor 1 |                       |         | Signature of D  | ebtor 2                           |                        |                              |
|  | Date                  | January | 21, 2020  | Date                              |                        |                              |

### Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main

| Fill in this information to identify your case: |                   |                   |            |                |
|---|-------------------|-------------------|------------|----------------|
| Debtor 1  | Conchetta Larae D | Dansler           |            |                |
|   | First Name        | Middle Name       | Last Name  |                |
| Debtor 2  |                   |                   |            |                |
| (Spouse if, filing)                             | First Name        | Middle Name       | Last Name  |                |
| United States Bankruptcy Court for the:         |                   | NORTHERN DISTRICT | OF GEORGIA |                |
| Case number                                     |                   |                   |            |                |
| (if known)                                      |                   |                   |            | ☐ Check if thi |
|   |                   |                   |            | amended f      |

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your as     | ssets<br>of what you own      |
|-----|--|-------------|-------------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$          | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 15,760.00                     |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 15,760.00                     |
| aı  | t 2: Summarize Your Liabilities  |             |                               |
|     |  |             | <b>abilities</b><br>t you owe |
|     | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 29,351.00                     |
|     | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 8,000.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 26,416.00                     |
|     | Your total liabilities   | \$          | 63,767.00                     |
| Pai | t 3: Summarize Your Income and Expenses  |             |                               |
| 1.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 2,593.00                      |
|     | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 2,593.00                      |
| aı  | t 4: Answer These Questions for Administrative and Statistical Records   |             |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | r other sch | nedules.                      |
| 7.  | ■ Yes What kind of debt do you have?   |             |                               |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

#### Case 20-40161-pwb Entered 01/21/20 17:54:31 Desc Main Doc 1 Filed 01/21/20 Page 42 of 56 Case number (if known) Document

Debtor 1 Conchetta Larae Dansler

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,283.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot  | al claim  |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |      |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$ _ | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$   | 8,000.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$   | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$   | 4,502.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$   | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$  | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 12,502.00 |

# Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 43 of 56

| Fill in th            | is information to id                                  | lentify your  | rasa:                   |               |                   |                    |              |  |
|-----------------------|---|---------------|-------------------------|---------------|-------------------|--------------------|--------------|--|
|                       |   |               |                         |               |                   |                    |              |  |
| Debtor 1              | Conche<br>First Name                                  | etta Larae D  | lansler<br>Middle Name  | 1.            | ast Name          |                    |              |  |
| Debtor 2              |   |               | Widdle Name             |               | ast Name          |                    |              |  |
| (Spouse if,           |   | 1             | Middle Name             | L             | ast Name          |                    |              |  |
| United S              | tates Bankruptcy Co                                   | ourt for the: | NORTHERN DISTRI         | CT OF GEOF    | RGIA              |                    |              |  |
| Case nu<br>(if known) | mber  |               |                         |               |                   |                    |              | Check if this is an amended filing                       |
|                       | aration A   |               | n Individua             | al Debi       | or's Scl          | hedules            |              | 12/15  |
|                       | g money or proper<br>both. 18 U.S.C. §§<br>Sign Below |               |                         | ankruptcy ca  | se can result in  | fines up to \$250, | ,000, or imp | risonment for up to 20                                   |
| Did                   |   | o pay some    | one who is NOT an at    | torney to hel | p you fill out ba | nkruptcy forms?    |              |  |
|                       | No  |               |                         |               |                   |                    |              |  |
|                       | Yes. Name of per                                      | son           |                         |               |                   |                    |              | etition Preparer's Notice,<br>lature (Official Form 119) |
|                       | er penalty of perju<br>they are true and              |               | that I have read the su | ummary and    | schedules filed   | with this declara  | ition and    |  |
| x                     | /s/ Conchetta Lar                                     | ae Dansler    |                         | Х             |                   |                    |              |  |
| _                     | Conchetta Larae<br>Signature of Debtor                | Dansler       |                         |               | Signature of D    | Debtor 2           |              |  |
|                       | Date January 21                                       | , 2020        |                         |               | Date              |                    |              |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 44 of 56

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Georgia

| In re | Conchetta Larae Dansler   |   | Case No.                 |                                    |
|-------|---|---|--------------------------|------------------------------------|
|       |   | Debtor(s)   | Chapter                  | 7                                  |
|       | DISCLOSURE OF CO  | OMPENSATION OF ATTO   | ORNEY FOR DE             | CBTOR(S)                           |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Banks compensation paid to me within one year before the rendered on behalf of the debtor(s) in contents.   | e the filing of the petition in bankrupto   | ey, or agreed to be paid | to me, for services rendered or to |
|       | For legal services, I have agreed to accept   | -   |                          | 1,400.00                           |
|       | Prior to the filing of this statement I have  |   |                          | 0.00                               |
|       |   |   |                          | 1,400.00                           |
| 2.    | The source of the compensation paid to me wa  | S:  |                          |                                    |
|       | ■ Debtor □ Other (specify):   |   |                          |                                    |
| 3.    | The source of compensation to be paid to me is  | ::  |                          |                                    |
|       | ☐ Debtor ☐ Other (specify):   | In addition to attorney fees, Debt in Section 7 below:  | or(s) shall pay the foll | lowing additional fees as stated   |
|       |   | Court Filing Fee:\$3 Credit Counseling Fee:\$   |                          |                                    |
|       |   | Total Balance Due on Fees: \$   | 1,760.00                 |                                    |
| 4.    | ■ I have not agreed to share the above-disclo   | sed compensation with any other person  | on unless they are meml  | pers and associates of my law firm |
|       | ☐ I have agreed to share the above-disclosed copy of the agreement, together with a list  |   |                          |                                    |
| 5.    | In return for the above-disclosed fee, I have ag  | reed to render legal service for all aspe   | ects of the bankruptcy c | ase, including:                    |
|       | <ul> <li>a. Analysis of the debtor's financial situation,</li> <li>b. Preparation and filing of any petition, scheec.</li> <li>c. Representation of the debtor at the meeting</li> <li>d. [Other provisions as needed]</li> <li>Base Fee Services:</li> </ul> | lules, statement of affairs and plan whi  | ch may be required;      |                                    |
|       | Assisting in the preparation and concepts of address Stop creditor actions against client attending and representing client and Negotiations with secured creditor Exemption planning   | ots, returns, and other relative docu<br>ompletion of client's bankruptcy peti<br>at the 341 Hearing and any reset he<br>is to reduce claim value to market v | ition<br>earings<br>alue | and filling of motions pursuant    |
|       | Debtor shall base the balance of the checks or debit account deduction  | ne agreed upon base fee through ir authorizations.  | nstallment payments e    | either by means of post-dated      |
|       |   | he Rights and Responsibilities Stat<br>vided to, and discussed with, the de   |                          | General Order No. 9 dated          |
| 6.    | By agreement with the debtor(s), the above-dis<br>Non-Base Fees Services/A La Car   |   | ng service:<br>Fee       |                                    |
|       | Objections to Dischargeability  | \$.   | 275.00/hr                |                                    |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 45 of 56

| In re | Conchetta Larae Dansler | Case No. |  |
|-------|-------------------------|----------|--|
|       | Debtor(s)               |          |  |

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| Adversary Proceedings                       | \$275.00/hr |
|---|-------------|
| Appellate Practice                          |             |
| Resolving issues caused by the              |             |
| client having falsely sworn on the petition | \$275.00/hr |
| Investigations by the US Trustee            |             |

Any services not specifically set forth in this disclosure statement that require litigation are to be considered Non-Base Fees Services/A La Carte Items, and will incur a fee of \$250.00/hour.

7. Client wishes to file a petition under Chapter 7 of the Bankruptcy Code. Client is unable to pay the Attorney Fee in full prior to filing the case. Client acknowledges that there is a split of authority nationwide regarding the propriety of accepting post-petition payments for Chapter 7 attorney Fees. Client further acknowledges that the Northern District of Georgia is in the minority of the Courts that does allow these post-petition payments. Debtor shall pay the balance of the agreed-upon attorney's fees and any additional amounts (court filing fee and credit counseling fee) in installments by means of post-dated checks or debit account deduction authorizations.

| means of post-dated checks of debit account deduction authorizations.   |                                    |  |  |  |
|---|------------------------------------|--|--|--|
|   | CERTIFICATION                      |  |  |  |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. |                                    |  |  |  |
| January 21, 2020  | January 21, 2020 /s/ Karen King    |  |  |  |
| Date  | Karen King                         |  |  |  |
|   | Signature of Attorney              |  |  |  |
|   | King & King Law, LLC               |  |  |  |
|   | 215 Pryor Street, SW               |  |  |  |
|   | Atlanta, GA 30303-3748             |  |  |  |
|   | (404) 524-6400 Fax: (404) 524-6425 |  |  |  |
|   | notices@kingkingllc.com            |  |  |  |
|   | Name of law firm                   |  |  |  |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 46 of 56

### **United States Bankruptcy Court** Northern District of Georgia

| Northern District of Georgia   |  |                     |                                       |  |  |  |  |  |  |
|--|--|---------------------|---------------------------------------|--|--|--|--|--|--|
| In re Conchetta Larae Dansler  |  | Case No.            |                                       |  |  |  |  |  |  |
|  | Debtor(s)                                      | Chapter             | 7                                     |  |  |  |  |  |  |
| . The state of the |  |                     |                                       |  |  |  |  |  |  |
| VERI   | FICATION OF CREDITOR                           | MATRIX              |                                       |  |  |  |  |  |  |
| he above-named Debtor hereby verifies the  | hat the attached list of creditors is true and | correct to the best | of his/her knowledge.                 |  |  |  |  |  |  |
| Date: January 21, 2020   | /s/ Conchetta Larae Dansler                    |                     |                                       |  |  |  |  |  |  |
|  | Conchetta Larae Dansler                        | ·                   | · · · · · · · · · · · · · · · · · · · |  |  |  |  |  |  |

Signature of Debtor

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 51 of 56

| Fill in this info                                  | ormation to identify your case:  |  | Che                    | eck one box                    | only as d                 | irected in this form and  | in Form                           |
|--|--|--|------------------------|--------------------------------|---------------------------|---|-----------------------------------|
| Debtor 1   | Conchetta Larae Dansler  |  |                        | 2A-1Supp:                      | ,                         |   |                                   |
| Debtor 2<br>(Spouse, if filing)                    |  |  | ı                      | 1. There i                     | s no pres                 | umption of abuse  |                                   |
| United States                                      | s Bankruptcy Court for the: Northern District of   | f Georgia  |                        | applie                         | s will be r               | o determine if a presur<br>nade under <i>Chapter 7</i><br>icial Form 122A-2). | •                                 |
| Case numbe<br>(if known)                           | ır   |  | [                      | ☐ 3. The Me                    | ans Test                  | does not apply now be service but it could ap                                 |                                   |
|  |  |  |                        |                                |                           | n amended filing  | 17                                |
| Official   | Form 122A - 1  |  |                        |                                |                           | •   |                                   |
| Chapte   | r 7 Statement of Your Cui  | rent Monthly   | Inc                    | ome                            |                           |   | 12/19                             |
| attach a separ<br>case number (<br>qualifying mili | e and accurate as possible. If two married people ate sheet to this form. Include the line number to vif known). If you believe that you are exempted frotary service, complete and file Statement of Exemple Calculate Your Current Monthly Income                | which the additional inform<br>m a presumption of abuse                | nation a               | pplies. On the                 | e top of a<br>t have prii | ny additional pages, writ<br>marily consumer debts o                          | te your name and<br>or because of |
| 1. What is   | s your marital and filing status? Check one or   | nly.   |                        |                                |                           |   |                                   |
| ☐ Not  | married. Fill out Column A, lines 2-11.  |  |                        |                                |                           |   |                                   |
| ☐ Marı   | ried and your spouse is filing with you. Fill o  | ut both Columns A and E  | 3, lines               | 2-11.                          |                           |   |                                   |
| ■ Marı   | ried and your spouse is NOT filing with you.   | You and your spouse  | are:                   |                                |                           |   |                                   |
| □Li  | ving in the same household and are not lega  | illy separated. Fill out b   | oth Col                | umns A and                     | B, lines 2                | 2-11.   |                                   |
| р  | iving separately or are legally separated. Fill enalty of perjury that you and your spouse are I ving apart for reasons that do not include evading.   | egally separated under r   | nonban                 | kruptcy law                    | hat appli                 | es or that you and your   |                                   |
| 101(10A). F<br>the 6 month                         | everage monthly income that you received from all for example, if you are filing on September 15, the 6-m is, add the income for all 6 months and divide the tota on the same rental property, put the income from that property is the income from that property. | nonth period would be Marcl<br>by 6. Fill in the result. Do n          | h 1 throu<br>ot includ | igh August 31<br>le any income | . If the amo              | ount of your monthly incon<br>ore than once. For examp                        | ne varied during<br>ble, if both  |
| ·  |  |  | •                      | Column A Debtor 1              | ·                         | Column B Debtor 2 or non-filing spouse  |                                   |
|  | ross wages, salary, tips, bonuses, overtime, deductions).  | and commissions (bef   | ore all                | \$ 3,2                         | 283.17                    | \$  |                                   |
| 3. Alimon  | y and maintenance payments. Do not include B is filled in.   | payments from a spous  | e if                   | \$                             | 0.00                      | \$  |                                   |
| of you<br>from an<br>and roo                       | ounts from any source which are regularly pa<br>or your dependents, including child support<br>unmarried partner, members of your household<br>mmates. Include regular contributions from a sp<br>Do not include payments you listed on line 3.                    | <ul> <li>Include regular contributed, your dependents, pare</li> </ul> | utions<br>ents,        | \$                             | 0.00                      | \$  |                                   |
| 5. Net inc   | ome from operating a business, profession,   |  |                        |                                |                           |   |                                   |
|  | eceipts (before all deductions) y and necessary operating expenses   | \$ 0.00<br>-\$ 0.00  |                        |                                |                           |   |                                   |
|  | nthly income from a business, profession, or far   | m \$ 0.00 Copy h   | nere ->                | \$                             | 0.00                      | \$  |                                   |
| 6. Net inc   | ome from rental and other real property  | _  |                        |                                |                           |   |                                   |
| _  |  | Debtor 1   |                        |                                |                           |   |                                   |
|  | eceipts (before all deductions)  | \$ <u>0.00</u><br>-\$ <u>0.00</u>                                      |                        |                                |                           |   |                                   |
|  | y and necessary operating expenses  nthly income from rental or other real property  | \$ 0.00 Copy h   | nere ->                | \$                             | 0.00                      | \$  |                                   |
|  | t dividends and revolting  | Ψ  |                        | \$<br>                         | 0.00                      | \$  |                                   |

Official Form 122A-1

## Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 52 of 56

Debtor 1 Conchetta Larae Dansler Case number (if known)

|      |  |   |   |  |                          |          | olumn A<br>ebtor 1 |             | Column Debtor | 2 or     | ıse        |                |
|------|--|---|---|--|--------------------------|----------|--------------------|-------------|---------------|----------|------------|----------------|
| 8.   | Unem   | ployr   | nent compensation   |  |                          | \$       |                    | 0.00        | \$            |          |            |                |
|      | the So   | cial S  | r the amount if you contend that the amount<br>security Act. Instead, list it here:   |  |                          | r        |                    |             |               |          |            |                |
|      | For  | you   | \$ spouse \$  | 0.0  | 0                        |          |                    |             |               |          |            |                |
| ٥    | Ponsi  | on or   | retirement income. Do not include any am  | ount received that was   | _                        |          |                    |             |               |          |            |                |
| 9.   | benefit<br>not inc<br>United<br>disabili<br>pay pa<br>does n | t underlude i<br>State<br>ity, or<br>aid un<br>not ex | rether Social Security Act. Also, except as steady and early compensation, pension, pay, annuity, onces Government in connection with a disability death of a member of the uniformed servicider chapter 61 of title 10, then include that peed the amount of retired pay to which you der any provision of title 10 other than chapter any provision of title 10 other than chapter than chapter and the second | ated in the next senten<br>r allowance paid by the<br>y, combat-related injury<br>es. If you received any<br>pay only to the extent the<br>would otherwise be en | ce, do  or retired at it | \$       |                    | 0.00        | \$            |          |            |                |
| 10.  | Do not receive domes United                                  | t inclu<br>ed as<br>stic te<br>l State                | m all other sources not listed above. Spe<br>de any benefits received under the Social S<br>a victim of a war crime, a crime against hun<br>rrorism; or compensation, pension, pay, ann<br>as Government in connection with a disability<br>death of a member of the uniformed service  | ecurity Act; payments<br>nanity, or international ouity, or allowance paid<br>y, combat-related injury   | or<br>by the<br>or       | <b>!</b> |                    |             |               |          |            |                |
|      | source   | es on   | a separate page and put the total below.  | •  |                          |          |                    |             |               |          |            |                |
|      |  | ·   |   |  | _                        | \$       |                    | 0.00        | \$            |          |            |                |
|      |  | _   |   |  | _                        | \$       |                    | 0.00        | \$            |          |            |                |
|      |  | To  | tal amounts from separate pages, if any.  |  | +                        | \$       |                    | 0.00        | \$            |          |            |                |
| 11.  |  |   | our total current monthly income. Add lin n. Then add the total for Column A to the tot   |  | \$                       | 3,2      | 283.17             | <b>+</b> \$ |               | _ =      | §          | 3,283.17       |
|      |  |   |   | '  |                          |          |                    |             |               |          | Total c    | urrent monthly |
| Part | 2:   | Dete  | rmine Whether the Means Test Applies to   | o You  |                          |          |                    |             |               |          |            |                |
|      |  |   |   |  |                          |          |                    |             |               |          |            |                |
| 12.  |  | -   | our current monthly income for the year.  | ·  |                          |          |                    |             |               |          |            |                |
|      | 12a. C   | ору у   | our total current monthly income from line 1  | 1  |                          |          | Copy               | line 11 h   | ere=>         | \$       |            | 3,283.17       |
|      | M  | 1ultipl   | y by 12 (the number of months in a year)  |  |                          |          |                    |             |               | _        | <b>x</b> 1 | 2              |
|      | 12b. T   | he re   | sult is your annual income for this part of the   | e form   |                          |          |                    |             | ,             | 12b. \$  | 3          | 9,398.04       |
| 13.  | Calcul   | late t  | he median family income that applies to y   | ou. Follow these steps   | s:                       |          |                    |             |               |          |            |                |
|      | Fill in t  | the st  | ate in which you live.  | GA   |                          |          |                    |             |               |          |            |                |
|      | Fill in t  | the nu  | ımber of people in your household.  | 1  |                          |          |                    |             |               |          |            |                |
|      | Fill in t  | he m  | edian family income for your state and size   | of household.  |                          |          |                    |             |               | 13. \$   | 4          | 9,236.00       |
|      | To find  | d a lis   | t of applicable median income amounts, go<br>. This list may also be available at the bank  | online using the link sp   |                          |          |                    |             |               |          |            |                |
| 14.  | How d  | lo the  | e lines compare?  |  |                          |          |                    |             |               |          |            |                |
|      | 14a.   |   | Line 12b is less than or equal to line 13. Or<br>Go to Part 3. Do NOT fill out or file Official   |  | ck box                   | κ 1,     | There is no        | presum      | otion of al   | buse.    |            |                |
|      | 14b.   |   | Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.   | f page 1, check box 2,   | The pr                   | resu     | mption of a        | buse is a   | letermine     | d by Foi | rm 12      | 2A-2.          |
| Part | 3:   | Sign  | Below   |  |                          |          |                    |             |               |          |            |                |
|      | В  | y sigi  | ning here, I declare under penalty of perjury   | that the information on  | this sta                 | ater     | ment and in        | any atta    | chments i     | s true a | nd co      | rrect.         |
|      | X  | /s/ (   | Conchetta Larae Dansler   |  |                          |          |                    |             |               |          |            |                |
|      | ^  | Cor   | nchetta Larae Dansler<br>nature of Debtor 1   |  |                          |          |                    |             |               |          |            |                |
|      | Date   | <u>Ja</u> n   | uary 21, 2020   |  |                          |          |                    |             |               |          |            |                |
|      |  | 122   |   | atement of Your Curre  |                          |          |                    |             |               |          |            | nage 2         |

Case 20-40161-pwb Doc 1 Filed 01/21/20 Entered 01/21/20 17:54:31 Desc Main Document Page 53 of 56

| Debtor 1 | Conchetta Larae Dansler  | Case number (if known) | <br> |
|----------|--|------------------------|------|
|          | MM/DD/YYYY   |                        |      |
|          | If you checked line 14a, do NOT fill out or file Form 122A-2.            |                        |      |
|          | If you checked line 14b, fill out Form 122A-2 and file it with this form |                        |      |

ACCEPTANCE RENTALS, 2850 Hog Mountain Rd Ste 201 Dacula, GA 30019

BLOOMINGDALES DEPARTMENT PO BOX 8218 MASON, OH 45040

CAPITAL ONE BANK USA NA PO BOX 30281 SALT LAKE CITY, UT 84130

CHRYSLER CAPITAL PO BOX 961212 FORT WORTH, TX 76161

CNAC - IN101 12802 HAMILTON XING BV CARMEL, IN 46032

COMENITY BANK/NWYRK&CO PO BOX 182789 COLUMBUS, OH 43218

COMENITY BANK/VCTRSSEC PO BOX 182789 COLUMBUS, OH 43218

COOSA VALLEY CREDIT UNIO 2010 REDMOND CI ROME, GA 30165

CREDIT ONE BANK PO BOX 98872 LAS VEGAS, NV 89193 EDFINANCIAL 120 N SEVEN OAKS DR KNOXVILLE, TN 37922

ERC
PO BOX 57547
JACKSONVILLE, FL 32241

FIRST SOUTHWESTERN FINAN 1845 W 4400 S ROY, UT 84067

Georgia Department of Revenue 1800 Century Blvd NE Suite 910 Atlanta, GA 30345

Grandview Apartments 1350 Joe Frank Harris Pkwy SE #110 Cartersville, GA 30120

IRS Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346

MACYS DEPARTMENT STORES PO BOX 8218 MASON, OH 45040

NATIONWD REC PO BOX 8005 CLEVELAND, TN 37320

ONEMAIN
PO BOX 1010
EVANSVILLE, IN 47706

Progressive Leasing 10619 S. Jordan Gateway South Jordan, UT 84095

REGIONAL FINANCE COMPANY 1200 ERNEST W BARRETT PY 216 KENNESAW, GA 30144

REPUBLIC FINANCE INC 471 E Main St Cartersville, GA 30121

Snap! Finance
to be provided

SYNCB/BELK PO BOX 965028 ORLANDO, FL 32896

SYNCB/JC PENNEY PO BOX 965007 ORLANDO, FL 32896

TD BANK USA/TARGET CREDI PO BOX 673 MINNEAPOLIS, MN 55440

WELLS FARGO CARD SERVICE PO BOX 14517 DES MOINES, IA 50306

Wellstar Hospital P.O. Box 742625 Atlanta, GA 30374